

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90045 004 ***150.00

DOCUMENT # L28384

1. Entity Name

ROTHENBERG CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

RONALD & KARINA ROTHENBERG
1033 AVIARY ROAD
WELLINGTON FL 33414

RONALD & KARINA ROTHENBERG
1033 AVIARY ROAD
WELLINGTON FL 33414-8959

00006997

2. Principal Place of Business

3. Mailing Address

1614 Grantham Drive

1614 Grantham Drive



DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Wellington, Fla

Wellington, Fla

4. FEI Number

65-0156843

Applied For

Not Applicable

Zip

Country

Zip

Country

33414

USA

33414

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROTHENBERG, RONALD & KARINA
1033 AVIARY ROAD
WELLINGTON FL 33414

New Address

Name

Street Address (P.O. Box Number is Not Acceptable)

1614 Grantham Drive

City

Wellington

FL

Zip Code

33414

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Karina Rothenberg

Signature, typed or printed name of registered agent and title if applicable.

(None Registered Agent signature required when reinstating)

DATE

1/16/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

| | | |
|----------------|--------------------|---------------------------------|
| TITLE | PVSD | <input type="checkbox"/> Delete |
| NAME | ROTHENBERG, KARINA | |
| STREET ADDRESS | 1033 AVIARY ROAD | |
| CITY-ST-ZIP | WELLINGTON FL | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | ROTHENBERG, RONALD | |
| STREET ADDRESS | 1033 AVIARY RD | |
| CITY-ST-ZIP | WELLINGTON FL | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|----------------------|---|
| TITLE | P1511 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 1614 Grantham Dr. | |
| STREET ADDRESS | Wellington FL 33414 | |
| CITY-ST-ZIP | Wellington, FL 33414 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 1614 Grantham Dr. | |
| STREET ADDRESS | Wellington, FL 33414 | |
| CITY-ST-ZIP | Wellington, FL 33414 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Karina Rothenberg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

President 1/16/00 561-790-935