

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90056 045 ****50.00

DOCUMENT # L99000008972

1. Entity Name

ROLLEM INVESTMENTS, L.L.C.



Principal Place of Business

1 SE 4TH AVE..
SUITE #210
DELRAY BEACH FL 33483

Mailing Address

1 SE 4TH AVE..
SUITE #210
DELRAY BEACH FL 33483

2. Principal Place of Business

5455 N. FEDERAL HWY
SUITE I

3. Mailing Address

5455 N. FEDERAL HWY
SUITE I

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

Zip
33487

Country
USA

Zip
33487

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0968088**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUBIN, FRANK L
1 SE 4TH AVE..
SUITE #210
DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

Name

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

5455 N. FEDERAL HWY, SUITE I

BOCA RATON

FL

33487

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
RUBIN, FRANK
1 SE 4TH AVE., SUITE #210
DELRAY BEACH FL 33483

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
5455 N. FEDERAL HWY, SUITE I
BOCA RATON, FL 33487

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE FRANK L. RUBIN 02/20/03 361 988 9335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)