

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M95836

1. Entity Name

ROCA PROPERTIES, INC.

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90112 042 ***150.00

Principal Place of Business

Mailing Address

% ALAN JAY WEISBERG
290 NW 165TH ST. STE 700
MIAMI FL 33169
US

C/O ALAN JAY WEISBERG
290 NW 165TH ST. STE 700
MIAMI FL 33169-6457
US

L0000001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2910550

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HALPYRN ERNEST M
1428 BRICKELL AVE STE 105
SUITE 106
MIAMI FL 33131

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD ☐ Delete
NAME WEISBERG, ALAN JAY
STREET ADDRESS 290 N.W. 165TH ST. PLAZA 700
CITY-ST-ZIP MIAMI FL

TITLE ASSISTANT SECRETARY ☒ Change ☐ Addition
NAME WEISBERG ALAN JAY
STREET ADDRESS 290 NW 165 ST PLAZA 700
CITY-ST-ZIP MIAMI FL 33169

TITLE D ☐ Delete
NAME LABIANCA, PHILIP
STREET ADDRESS 1428 BRICKELL AVE, STE 105
CITY-ST-ZIP MIAMI FL

TITLE SECRETARY/TREASURER/D ☒ Change ☐ Addition
NAME LABIANCA, PHILIP
STREET ADDRESS 1428 BRICKELL AVE #105
CITY-ST-ZIP MIAMI FL 33131

TITLE VPD ☐ Delete
NAME DEVECCHI, JOHN
STREET ADDRESS 1428 BRICKELL AVE, STE 105
CITY-ST-ZIP MIAMI FL

TITLE PRESIDENT/DIRECTOR ☐ Change ☒ Addition
NAME ERNEST M HALPRYN
STREET ADDRESS 1428 BRICKELL AVE #105
CITY-ST-ZIP MIAMI FL 33131

TITLE T ☒ Delete
NAME BRAUSE, STEVEN G
STREET ADDRESS 290 N W 165 STREET, PLAZA 700
CITY-ST-ZIP MIAMI FL

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME JUDITH A HOERNER
STREET ADDRESS 1428 BRICKELL AVE #105
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Ernest M Halpryn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERNEST M HALPRYN

03-22-00

305 371-4112

Date

Daytime Phone #