

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000008893

1. Entity Name  
101 OCEAN INVESTMENTS, INC.

**FILED**  
**Apr 27, 2001 8:00 am**  
**Secretary of State**

04-27-2001 90340 025 \*\*\*150.00

Principal Place of Business  
C/O ROTH, ROUSSO & BENJAMIN, P.A.  
9350 SOUTH DIXIE HWY. PH 2  
MIAMI FL 33156

Mailing Address  
C/O ROTH, ROUSSO & BENJAMIN, P.A.  
9350 SOUTH DIXIE HWY. PH 2  
MIAMI FL 33156



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
3440 Hollywood Blvd

3. Mailing Address  
3440 Hollywood Blvd

Suite, Apt. #, etc.  
360

Suite, Apt. #, etc.  
360

City & State  
Hollywood, FL

City & State  
Hollywood, FL

4. FEI Number  
65-1041907

Applied For  
Not Applicable

Zip  
33021

Country  
U.S.A.

Zip  
33021

Country  
U.S.A.

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

ROTH, LEONARDO A  
9350 SOUTH DIXIE HWY, PH 2  
MIAMI FL 33156

Name ROTH, LEONARDO A. ESQ  
Street Address (P.O. Box Number is Not Acceptable)  
3440 HOLLYWOOD BLVD, SUITE 360  
City HOLLYWOOD FL Zip Code 33021

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 *Leonardo A. Roth* LEONARDO A. ROTH, ESQ 4-19-01  
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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	DPT RUCHTEIN, LUIS ITUZAINGO 94, 3 PISO OF 9 10 Y 11 5000 CORDOBA ARGENTINA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS RUCHTEIN, ISRAEL S ITUZAINGO 94, 3 PISO OF 9 10 Y 11 5000 CORDOBA ARGENTINA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Luis Ruchtein* LUIS RUCHTEIN (D,P,T) 4-19-01 (954)322-4280.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)