

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000105030

1. Entity Name

ROSEMAN INCORPORATED

**FILED**  
**Apr 23, 2001 8:00 am**  
**Secretary of State**

04-23-2001 90093 046 \*\*\*150.00

Principal Place of Business

4927 COCONUT CREEK PARKWAY  
COCONUT CREEK FL 33063

Mailing Address

4927 COCONUT CREEK PARKWAY  
COCONUT CREEK FL 33063

2. Principal Place of Business

4911 Coconut Creek Parkway  
Suite, Apt. #, etc.

3. Mailing Address

4911 Coconut Creek Parkway  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Coconut Creek, FL

City & State

Coconut Creek, FL

4. FEI Number

651054820

Applied For

Not Applicable

Zip

33063

Country

USA

Zip

33063

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROSEMAN, MICHAEL  
4927 COCONUT CREEK PARKWAY  
COCONUT CREEK FL 33063

7. Name and Address of New Registered Agent

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, 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

TITLE	D	<input type="checkbox"/> Delete
NAME	ROSEMAN, MICHAEL	
STREET ADDRESS	4927 COCONUT CREEK PARKWAY	
CITY-ST-ZIP	COCONUT CREEK FL 33063	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Roseman, <del>Mike</del> Michael	
STREET ADDRESS	4911 Coconut Creek Parkway	
CITY-ST-ZIP	Coconut Creek, FL 33063	
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		
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:

*Michael Roseman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-01  
Date

954-972-3488  
Daytime Phone #

CR2E034 (10/00)