

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000019523

1. Entity Name
ROLLERSHOCK, CORPORATION

Principal Place of Business
9010 SW 137 AVE STE 222
MIAMI FL 33178

Mailing Address
9010 SW 137 AVE STE 222
MIAMI FL 33178

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JAN -3 PM 3:41



REINSTATEMENT *02*
DO NOT WRITE IN THIS SPACE

4. FEI Number *14-1862550* Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KUNCZ, VANESSA

9010 SW 137 AVE STE 222
MIAMI FL 33178

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

SIGNATURE *Vanessa Kuncz*

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

(NOTE: Registered Agent signature required when reinstating)

DATE *11/25/02*

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 DP Delete
NAME KUNCZ, VANESSA
STREET ADDRESS 9010 SW 137 AVE STE 222
CITY-ST-ZIP MIAMI FL 33178

TITLE DS Delete
NAME KUNCZ, KARLA
STREET ADDRESS 9010 SW 137 AVE STE 222
CITY-ST-ZIP MIAMI FL 33178

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

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

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *700008726587* Change Addition
NAME *10/31/02--01047--015* ***\$550.00*
STREET ADDRESS
CITY-ST-ZIP

TITLE *700008726587* Change Addition
NAME *11/27/02--01108--021* ***200.00*
STREET ADDRESS
CITY-ST-ZIP

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

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

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

TITLE Change Addition
NAME Change Addition
STREET ADDRESS Change Addition
CITY-ST-ZIP Change 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: *Karla Kuncz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/02 786-344-1136

Daytime Phone #

060912
AV

CR2E034 (4/02)