

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2002 8:00 am
Secretary of State
 05-17-2002 90013 035 ***150.00

DOCUMENT # P39104

1. Entity Name

ROTONICS MANUFACTURING INC.

Principal Place of Business

**17022 S. FIGUEROA STREET
 GARDENA CA 90248**

Mailing Address

**17022 S. FIGUEROA STREET
 GARDENA CA 90248**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-2467474

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

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, 2002 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: **PCEO** ☐ Delete
 NAME: **MCKINNISS, SHERMAN**
 STREET ADDRESS: **17022 S FIGUEROA STREET**
 CITY-ST-ZIP: **GARDENA CA**

TITLE: **D** ☐ Delete
 NAME: **DEDONATO, LARRY M.**
 STREET ADDRESS: **1429 MAIN STREET**
 CITY-ST-ZIP: **DELANO CA**

TITLE: **SD** ☐ Delete
 NAME: **TONKOVICH, E PAUL**
 STREET ADDRESS: **1851 EAST FIRST ST #800**
 CITY-ST-ZIP: **SANTA ANA CA**

TITLE: **D** ☐ Delete
 NAME: **POLITE, DAVID C.**
 STREET ADDRESS: **11511 NW CUMMINS ROAD**
 CITY-ST-ZIP: **CARLTON OR**

TITLE: **CFO** ☐ Delete
 NAME: **RUSSELL, DOUGLAS W**
 STREET ADDRESS: **17022 S FIGUEROA STREET**
 CITY-ST-ZIP: **GARDENA CA**

TITLE: **D** ☐ Delete
 NAME: **SHYDER, LARRY L**
 STREET ADDRESS: **2936 N 33RD STREET**
 CITY-ST-ZIP: **LINCOLN NE 68504**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **DIRECTOR** ☒ Change ☐ Addition
 NAME: **DIRECTOR**
 STREET ADDRESS: **DIRECTOR**
 CITY-ST-ZIP: **DIRECTOR**

TITLE: **DIRECTOR** ☐ Change ☒ Addition
 NAME: **MARC BERMAN**
 STREET ADDRESS: **2350 TAYLOR STREET, SUITE 7**
 CITY-ST-ZIP: **SAN FRANCISCO, CA 94133**

TITLE: **PREIDENT/CEO** ☐ Change ☒ Addition
 NAME: **ROBERT E. GAWLIK**
 STREET ADDRESS: **17022 S. FIGUEROA STREET**
 CITY-ST-ZIP: **GARDENA, CA 90248**

TITLE: **DIRECTOR** ☐ Change ☒ Addition
 NAME: **JULES SANDFORD**
 STREET ADDRESS: **635 W. FOOTHILL BLVD.**
 CITY-ST-ZIP: **MONROVIA, CA 91016**

TITLE: **DIRECTOR** ☐ Change ☐ Addition
 NAME: **DIRECTOR**
 STREET ADDRESS: **DIRECTOR**
 CITY-ST-ZIP: **DIRECTOR**

TITLE: **DIRECTOR** ☒ Change ☐ Addition
 NAME: **SNYDER, LARRY L.**
 STREET ADDRESS: **SNYDER, LARRY L.**
 CITY-ST-ZIP: **SNYDER, LARRY L.**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE REQUIRE DOUGLAS W. RUSSELL 4/24/02 (310)538-4932

CR2E034 (9/01)