

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000004277

1. Entity Name

ROTMAN CONSULTING GROUP INC.

FILED

Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90143 002 ***150.00

Principal Place of Business

841 HAMPTON CT
WESTON FL 33326
US

Mailing Address

1304 SW 180TH AVE #129
SUNRISE FL 33326-1902
US

2. Principal Place of Business

1940-3 N. Commerce Parkway
Suite, Apt. #, etc.

3. Mailing Address

1940-3 N. Commerce Parkway
Suite, Apt. #, etc.

City & State

Weston, FL

City & State

Weston, FL

Zip

33326

Country

U.S.

Zip

33326

Country

U.S.

4. FEI Number

65-0567657

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROTMAN, JEFFREY R
841 HAMPTON COURT
WESTON FL 33326

7. Name and Address of New Registered Agent

Name

Jeffrey Rotman

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

1940-3 N. Commerce Parkway

City

Weston

FL

Zip Code

33326

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

TITLE	DP	<input type="checkbox"/> Delete
NAME	ROTMAN, JEFFREY R	
STREET ADDRESS	841 HAMPTON COURT	
CITY-ST-ZIP	WESTON FL 33326	
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	Vice President - Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Claudia M. Rotman	
STREET ADDRESS	1940-3 N. Commerce Parkway	
CITY-ST-ZIP	Weston, FL 33326	
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeffrey Rotman	
STREET ADDRESS	1940-3 N. Commerce Parkway	
CITY-ST-ZIP	Weston, FL 33326	
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 officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey Rotman

4/1/00

Date

(854) 389-0314

Daytime Phone #

CR2E034 (9/99)