

## 2000 UNIFORM BUSINESS REPORT (UBR)

2/2

DOCUMENT # P94000090605

1. Entity Name

SARRO, INC.

**FILED**  
**May 02, 2000 8:00 am**  
**Secretary of State**

02-20-2000 90027 045 \*\*\*150.00

Principal Place of Business

4515 GEORGIA AVENUE  
 #206  
 W. PALM BEACH FL 33405  
 US

Mailing Address

4515 GEORGIA AVENUE  
 #206  
 W. PALM BEACH FL 33405-2809  
 US

2. Principal Place of Business

4507 GEORGIA AVENUE  
 Suite, Apt. #, etc.

3. Mailing Address

4507 GEORGIA AVENUE  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City &amp; State

WEST PALM BEACH, FL

City &amp; State

WEST PALM BEACH, FL

4. FEI Number

65-0544085

Applied For

Not Applicable

Zip

33405

Country

U.S.A.

Zip

33405

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

KOEPPPEL, JOEL P ESQ  
 222 LAKEVIEW AVENUE  
 SUITE 260  
 WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name **RONALD W. OERTH**  
 Street Address (P.O. Box Number is Not Acceptable)  
**4507 GEORGIA AVENUE**  
 City **WEST PALM BEACH** FL Zip Code **33405**

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)

3/1/00

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** ☐ Delete  
 NAME **OERTH, RONALD W**  
 STREET ADDRESS **3259 CLINT MOORE ROAD - #206**  
 CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Delete  
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 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Change ☐ Addition  
 NAME **OERTH, RONALD W.**  
 STREET ADDRESS **4507 GEORGIA AVENUE**  
 CITY-ST-ZIP **WEST PALM BEACH, FL 33405**

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

TITLE ☐ Change ☐ Addition  
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 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)(f), 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:

**RONALD W. OERTH**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/00

Date

561-820-9202

Daytime Phone #

CR2E034 (9/99)