

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000022025

1. Entity Name

AERIAL TWO, INC.

FILED

Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90051 010 ***150.00

Principal Place of Business

Mailing Address

3854 N.W. 89 WAY
COOPER CITY FL 33024
US

3854 N.W. 89 WAY
COOPER CITY FL 33317-3505
US

2. Principal Place of Business

5701 SW 2ND STREET

Suite, Apt. #, etc.

3. Mailing Address

5701 SW 2ND STREET

Suite, Apt. #, etc.

City & State

PLANTATION, FL

Zip

33317

Country

BROWARD

City & State

PLANTATION, FL

Zip

33317

Country

BROWARD

4. FEI Number

65-0586938

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RORER, ERNEST H
3854 N.W. 89 WAY
COOPER CITY FL 33024

7. Name and Address of New Registered Agent

Name RORER, H. ERNEST

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

5701 SW 2ND ST

City PLANTATION

FL Zip Code 33317

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

H. Ernest Rorer PRES

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1 FEB 2000

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 PD
NAME RORER, ERNEST H
STREET ADDRESS 3854 N.W. 89 WAY
CITY-ST-ZIP COOPER CITY FL 33024 ☒ Delete

TITLE TSD
NAME RORER, MARILYNN K
STREET ADDRESS 3854 N.W. 89 WAY
CITY-ST-ZIP COOPER CITY FL 33024 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME RORER, H. ERNEST
STREET ADDRESS 5701 SW 2ND ST.
CITY-ST-ZIP PLANTATION, FL 33317 ☒ Change ☐ Addition

TITLE TSD
NAME RORER, MARILYNN D.
STREET ADDRESS 5701 SW 2ND ST.
CITY-ST-ZIP PLANTATION, FL 33317 ☒ Change ☐ Addition

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

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

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

TITLE
NAME
STREET ADDRESS
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:

H. Ernest Rorer PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

H. ERNEST RORER 1 FEB 2000 954-742-71

Date

Daytime Phone #