

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000079375

1. Entity Name
ROKAM CORPORATION

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90155 041 ***150.00

Principal Place of Business Mailing Address
10767 SW 104 ST 10767 SW 104 ST
MIAMI FL 33176 MIAMI FL 33176-8164
US US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.
3. Mailing Address Suite, Apt. #, etc.

City & State City & State 4. FEI Number **65-0749261** Applied For Not Applicable
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SOICHER, OSCAR
9100 SOUTH DADELAND BLVD. #906
MIAMI FL 33156

Name **Oscar Soicher**
Street Address (P.O. Box Number is Not Acceptable)
10767 S.W. 104th Street
City **Miami** FL Zip Code **33176**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD SOICHER, OSCAR <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Oscar Soicher* **OSCAR SOICHER** 1/10/00 (305) 670-2122
Date Daytime Phone #

CR2E034 (9/99)