

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000026954

1. Entity Name
ROSELL ENTERPRISES, INC.

FILED
May 25, 2001 8:00 am
Secretary of State

05-25-2001 90289 046 ***150.00

Principal Place of Business

4460 NW 107 AVE.
#203
MIAMI FL 33178

Mailing Address

4460 NW 107 AVE.
#203
MIAMI FL 33178

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 **65-0739381**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ROSELL, JESUS JR.
14204 SW 75TH TERRACE
MIAMI FL 33183

7. Name and Address of New Registered Agent

Name **Rosell, Jesus Jr.**
Street Address (P.O. Box Number is Not Acceptable)
4460 NW 107 Ave #203
Miami, Florida 33178
City **Miami** FL Zip Code **33178**

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.

(NOT)

Registered Agent's 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, 2001 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 **D** ☐ Delete
NAME **ROSELL, JESUS JR.**
STREET ADDRESS **14204 SW 75TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE **P** ☐ Delete
NAME **ROSELL, S**
STREET ADDRESS **14204 SW 75TH TERR**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P.D.** ☒ Change ☐ Addition
NAME **~~Sandra Rosell~~ JESUS ROSELL**
STREET ADDRESS **4460 NW 107 Ave #203**
CITY-ST-ZIP **Mia, FL 33178**

TITLE **VP** ☒ Change ☐ Addition
NAME **SANDRA ROSELL**
STREET ADDRESS **4460 NW 107 Ave #203**
CITY-ST-ZIP **Miami, Florida 33178**

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

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

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

TITLE ☐ Change ☐ 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 the 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 #

CR2E034 (10/00)