

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000098503

1. Entity Name

VANDERBILT & ROTH, INC.

FILED

00 APR -4 AM 9:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

905 BRICKELL BAY DR. #1831  
MIAMI FL 33131

Mailing Address

905 BRICKELL BAY DR. #1831  
MIAMI FL 33131-2928

2. Principal Place of Business

900 East Atlantic Blvd

Suite, Apt. #, etc.

Suite 6

City & State

Pompano Beach

Zip

33060

Country

USA

3. Mailing Address

900 East Atlantic Blvd

Suite, Apt. #, etc.

Suite 6

City & State

Pompano Beach

Zip

33060

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0879155

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RABENSEIFNER, HANNA  
905 BRICKELL BAY DR. #1831  
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Johana Aquilino

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

3961 N. Federal Hwy

City

Pompano Beach

FL

Zip Code

33064

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

Johana Aquilino

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

(NOTE: Registered Agent signature required when reinstating)

3/30/2000

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 D  
NAME PETROWICZER, RUTH  
STREET ADDRESS 905 BRICKELL BAY DR. #1831  
CITY-ST-ZIP MIAMI FL 33131

☒ Delete

TITLE  
NAME  
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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE REJANE APPA CALDAS DA SILVA  
NAME 900 E. Atlantic Blvd #6  
STREET ADDRESS Pompano Beach - FL 33060  
CITY-ST-ZIP

☐ Change

☒ Addition

Director

President

TITLE Paulo Guilherme Da Silva  
NAME 900 E. Atlantic Blvd #6  
STREET ADDRESS Pompano Beach - FL 33060  
CITY-ST-ZIP

☐ Change

☒ Addition

Director

Vice-Pres

TITLE Fabio Moura  
NAME 900 E. Atlantic Blvd #6  
STREET ADDRESS Pompano Beach - FL 33060  
CITY-ST-ZIP

☐ Change

☒ Addition

Director

Treas

TITLE REJANE APPA CALDAS DA SILVA  
NAME 900 E. Atlantic Blvd #6  
STREET ADDRESS Pompano Beach - FL 33060  
CITY-ST-ZIP

☐ Change

☒ Addition

Secretary

000003203678--4

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\*\*\*\*150.00 \*\*\*\*150.00

☐ Change

☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/2000

Date

954-786-7180

Daytime Phone #

CR2E034 (9/99)