

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101179

1. Entity Name
ROCHFORD OVERSEAS INC

FILED
May 07, 2001 8:00 am
Secretary of State
05-07-2001 90053 006 ***150.00

Principal Place of Business

**1200 BRICKELL AVE
STE 900
MIAMI FL 33131
US**

Mailing Address

**1200 BRICKELL AVE
STE 900
MIAMI FL 33131
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**200 So. Biscayne Blvd.
Suite, Apt. #, etc.
Suite 2000**

3. Mailing Address

**200 So. Biscayne Blvd.
Suite, Apt. #, etc.
Suite 2000**

City & State
Miam, Florida

Zip
33131-2310

Country
USA

City & State

Miami, Florida

Zip

33131-2310

Country

USA

4. FEI Number **65-0879418**

Applied For

Not Applicable

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

**AGIM REGISTERD AGENTS, INC
1200 BRICKELL AVE
STE 900
MIAMI FL 33131**

Name
James M. Meyer, Esq.

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

Kilpatrick Stockton LLP

Suite 2000

200 South Biscayne Boulevard

Miami, Florida

Zip Code

33131-2310

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)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DS** ☐ Delete
NAME **FOGACA DE AGUIAR, ANA L G**
STREET ADDRESS **9 COCONUT LANE GRAND BAY VILLAS**
CITY-ST-ZIP **KEY BISCAYNE FL 33149**

TITLE **DS** ☐ Change ☐ Addition
NAME **21 Grand Bay Estates Circle**
STREET ADDRESS **Key Biscayne, Florida 33149**
CITY-ST-ZIP

TITLE **DP** ☐ Delete
NAME **FOGACA DE AGUIAR, SEBASTIAO**
STREET ADDRESS **9 COCONUT LAND GRAND BAY VILLAS**
CITY-ST-ZIP **KEY BISCAYNE FL 33149**

TITLE ☐ Change ☐ Addition
NAME **21 Grand Bay Estates Circle**
STREET ADDRESS **Key Biscayne, Florida 33149**
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 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

Date

Daytime Phone #

CR2E034 (10/00)