

2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 DEC 31 PM 4:44

DOCUMENT # P99000011665

1. Entity Name
ROTEM, INC.



Principal Place of Business
19575 BISCAYNE BLVD.
AVENTURA MALL RM 1281
AVENTURA, FL 33180

Mailing Address
19575 BISCAYNE BLVD.
AVENTURA MALL RM 1281
AVENTURA, FL 33180



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

12022008 REIN-P CR2E098 (1/07)

City & State

City & State

4. FEI Number
65-0894141

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

BITTON, MOSHE
19575 BISCAYNE BLVD.
AVENTURA MALL RM 1281
AVENTURA, FL 33180

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2009, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME BITTON, MOSHE
STREET ADDRESS 19575 BISCAYNE BLVD.
CITY-ST-ZIP AVENTURA, FL 33180

TITLE
NAME
STREET ADDRESS 1800 Sanger Road Circle
CITY-ST-ZIP Sunnyside FL 33323

TITLE STD
NAME BITTON, JUDY
STREET ADDRESS 19575 BISCAYNE BLVD.
CITY-ST-ZIP AVENTURA, FL 33180

TITLE
NAME
STREET ADDRESS 800139488258
CITY-ST-ZIP 01/05/09--01064--009 **150.00

TITLE VD
NAME BRAUNSTEIN, VIC
STREET ADDRESS 19575 BISCAYNE BLVD.
CITY-ST-ZIP AVENTURA, FL 33180

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Moshe Bitton

Date

Daytime Phone #