

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000023345

1. Entity Name

ROXY MANAGEMENT CORPORATION OF MIAMI

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

17813 BISCAYNE BLVD  
Suite, Apt. #, etc.

3. Mailing Address

17813 BISCAYNE BLVD  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

AVENTURA, FL

City & State

AVENTURA, FL

Zip

33160

Country

USA

Zip

33160

Country

USA

4. FEI Number

65-0925286

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

JARRET L GROSS

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

17813 BISCAYNE BLVD

City

AVENTURA

FL

Zip Code

33160

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/20/02

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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	NAME	STREET ADDRESS	CITY-ST-ZIP
	<u>P.D.</u>	<u>GROSS, JARRET L</u>	<u>17813 BISCAYNE BLVD</u> <u>AVENTURA, FL 33160</u>
	<u>VP, D</u>	<u>ANTMAN, STEVEN</u>	<u>17813 BISCAYNE BLVD</u> <u>AVENTURA, FL 33160</u>

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JARRET L GROSS

DATE

5/20/02

Daytime Phone #

305-528-3210