

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000031136

1. Entity Name
RIM SARASOTA, INC.

FILED
Aug 23, 2000 8:00 am
Secretary of State

08-23-2000 90028 008 ***550.00

Principal Place of Business

559 BEACH ROAD
SARASOTA FL 34242

Mailing Address

P.O. 2512
SARASOTA FL 34230

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34242

Country

SARASOTA

Zip

34230

Country

USA

4. FEI Number

☒ 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

MARINKOVIC, ROLAND I

559 BEACH ROAD
SARASOTA FL 34242

Name

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

1231 DERBY LANE

City

SARASOTA

FL

Zip Code

34242

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	PD	<input type="checkbox"/> Delete
NAME	MARINKOVIC, ROLAND I	
STREET ADDRESS	559 BEACH ROAD	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE	DSVP	<input type="checkbox"/> Delete
NAME	ROHER, JAMES	
STREET ADDRESS	4018 WINTER HAVEN DRIVE	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROHRER, PATRICIA	
STREET ADDRESS	4018 WINTER HAVEN DRIVE	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	T	<input type="checkbox"/> Delete
NAME	MARINKOVIC, MICHAEL KENT	
STREET ADDRESS	559 BEACH ROAD	
CITY-ST-ZIP	SARASOTA FL 34242	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1231 DERBY LANE	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1249 DERBY LANE	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1249 DERBY LANE	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1231 DERBY LANE	
CITY-ST-ZIP	SARASOTA, FL 34242	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 OF MICHAEL KENT MARINKOVIC, Pres.

Date

8/20/00

Daytime Phone #

(941) 346-9925

CR2E034 (500)