


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90178 033 ***150.00

DOCUMENT # P99000098545

1. Entity Name
ROTRO INC.



Principal Place of Business
3106 NW 204TH LANE
MIAMI FL 33056

Mailing Address
3106 NW 204TH LANE
MIAMI FL 33056



2. Principal Place of Business
3329 N.W. 201 ST
Suite, Apt. #, etc.

3. Mailing Address
3329 N.W. 201 ST
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Miami FL

Zip
33056

Country

4. FEI Number 65-0977048

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TINGLING, ROY
3106 NW 204TH LANE
MIAMI FL 33056

7. Name and Address of New Registered Agent

Name TINGLING, ROY

Street Address (P.O. Box Number is Not Acceptable)
3329 N.W. 201 ST

City Miami FL Zip Code 33056

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 May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TINGLING, ROY 3106 NW 204TH LANE MIAMI FL 33056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 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 2-16-03 (305) 620-9196 Daytime Phone #

CR2E034 (10/02)