2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 480690 1. Entity Name

R & M LOGISTICS CORP.

Enjuty Name										
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Principal Place of Business

Mailing Address

16400 N.W. 2ND AVE.

16400 N.W. 2ND AVE

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

Feb 28, 2001 8:00 am Secretary of State 02-28-2001 90065 006 ***158.75

E #202 Ami FL 33169		STE. #202 MIAMI FL 33169	i/ n n ω j							
. Principal Place of Busin	ness	3. Mailing Address		DO NOT WRITE IN THIS SPACE						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·							
City & State		City & State			4. FEI Number	59-1676766		<u> </u>	plied For	
Zip	Country	Zip	Zip Country			5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name	and Address of Current R	egistered Agent			7. Name and A	dress of New Re	gistered A	gent		
		<u>"</u>		Name				.=		ĺ
OSHEROFF, M/ 16400 N.W. 2N				Street Address (P.O. Box Number is Not Acceptable)						
#203										
MIAMI FL 3316	,			City			FL	Zip Cod	e	1
]
SIGNATURESignature, typed	y submits this statement for or printed name of registered agent and the printed name of the state of the sta	nd title if applicable. (NOT	E: Rogistere	d Agent signature require		in the state of Fish	DATE			
Tax filing requirement (See criteria on back)	ible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550 Make Check Payable to Department of			0.00 Trust Fund Contribution Added to Fees					
1.	OFFICERS AND I	DIRECTORS	12.		ADDITIONS/CI	HANGES TO OFFIC	CERS AND	DIRECTOR	S IN 11]_
	l, robert s jr W. 2nd ave., suite #2 . 33169	□ Delete						☐ Change	Addition	CR2E034 (10/00)
ITLE PD OSHERO	FF, MARC A W. 2ND AVE., SUITE #2	□ Delete 03						☐ Change	Addition	CR2
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		☐ Delete						☐ Change	Addition	
ITLE IAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	Addition	
ITLE IAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1				☐ Change	☐ Addition	
TITLE VAME STREET ADDRESS DITY-ST-ZIP		☐ Delete						☐ Change	☐ Addition	1

of the corporation or the receiver or trustee empowered to execute his 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.