

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90108 001 ***158.75

DOCUMENT # 606848

1. Corporation Name

R. & E. DEVELOPERS CORP.

Principal Place of Business

2400 SW 137TH CT
MIAMI FL 33175
US

Mailing Address

2400 SW 137TH CT
MIAMI FL 33175
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

01/16/1979

4. FEI Number

59-2059503

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 2460 SW 137 AVE

Suite, Apt. #, etc.

22 250

City & State

23 Miami, FL 33175

Zip

24 33175

Country

25 USA

2a. Mailing Address

26 2460 SW 137 AVE

Suite, Apt. #, etc.

27 250

City & State

28 Miami, FL 33175

Zip

29 33175

Country

30 USA

9. Name and Address of Current Registered Agent

ROSADO, RAFAEL R
2400 SW 137TH CT
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name

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

2460 SW 137 AVE

83

Suite 250

84 City

Miami

FL

85 Zip Code

33175

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME ROSADO, RAFAEL R
STREET ADDRESS 2450 SW 137 AVE #234
CITY-ST-ZIP MIAMI, FL 00000

TITLE SV ☐ DELETE

NAME ROSADO, LEOCADIA
STREET ADDRESS 2450 SW 137 AVE #234
CITY-ST-ZIP MIAMI, FL 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change

☐ Addition

2460 SW 137 AVE, Suite 250

Miami, FL 33175

☒ Change

☐ Addition

2460 SW 137 AVE, Suite 250

Miami, FL 33175

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3-31-99

305-227-7763

Date

Daytime Phone #