

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC -5 AM 10:27

DOCUMENT # P95000046566 (2)
1. Corporation Name

RR 4 MARKETING GROUP, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

Principal Place of Business Mailing Address
6877 SW 131ST COURT 6877 SW 131ST COURT
MIAMI FL 33183 MIAMI FL 33183

2. Principal Place of Business 2a. Mailing Address
21 15266 SW 170 TERRACE 26 P.O. BOX 831477
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 MIAMI - FLORIDA 28 MIAMI - FLORIDA
Zip Country Zip Country
24 33187 25 U.S.A. 29 33283-1477 30 U.S.A.

3. Date Incorporated or Qualified 3a. Date of Reinstatement
06/12/1995 9/13
4. FEI Number Applied For
65-0598917 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing Trust Fund Contribution ☒ \$5.00 May Be
Added to Fees
8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
RODRIGUEZ, RAFAEL L SR.
6877 SW 131ST COURT
MIAMI FL 33183

10. Name and Address of New Registered Agent
81 Name RODRIGUEZ, RAFAEL L. SR.
82 Street Address (P.O. Box Number is Not Acceptable)
15266 SW 170 TERRACE
83
84 City MIAMI FL 85 Zip Code 33187

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 RAFAEL L. RODRIGUEZ SR. RAFAEL L. RODRIGUEZ SR. 11/20/96
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 PD ☐ DELETE
NAME RODRIGUEZ, RAFAEL L SR.
STREET ADDRESS 6877 SW 131ST COURT
CITY-ST-ZIP MIAMI FL 33183
TITLE VD ☐ DELETE
NAME RODRIGUEZ, RAFAEL L SR.
STREET ADDRESS 6877 SW 131ST COURT
CITY-ST-ZIP MIAMI FL 33183
TITLE STD ☐ DELETE
NAME RODRIGUEZ, RONALD
STREET ADDRESS 6877 SW 131ST COURT
CITY-ST-ZIP MIAMI FL 33183
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 PD ☒ Change ☐ Addition
1.2 NAME RODRIGUEZ, RAFAEL L. SR.
1.3 STREET ADDRESS 15266 SW 170 TERRACE
1.4 CITY-ST-ZIP MIAMI-FL 33187
2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME RODRIGUEZ, RAFAEL L. SR.
2.3 STREET ADDRESS 15266 SW 170 TERRACE
2.4 CITY-ST-ZIP MIAMI-FL 33187
3.1 TITLE SD ☒ Change ☐ Addition
3.2 NAME RODRIGUEZ, RONALD
3.3 STREET ADDRESS 15266 SW 170 TERRACE
3.4 CITY-ST-ZIP MIAMI-FL 33187
4.1 TITLE TD ☐ Change ☒ Addition
4.2 NAME RODRIGUEZ, ROBERT
4.3 STREET ADDRESS 15266 SW 170 TERRACE
4.4 CITY-ST-ZIP MIAMI-FL 33187
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 200002021832--5
5.3 STREET ADDRESS -12/06/96--01025--005
5.4 CITY-ST-ZIP ***380.00 ***380.00
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: RAFAEL L. RODRIGUEZ SR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RAFAEL L. RODRIGUEZ SR.

8/17/96 305-252-9289
Date Daytime Phone #

CR2E034 (3/96)