

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  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90022 034 \*\*\*155.00

DOCUMENT # P95000046566

1. Corporation Name  
RR 4 MARKETING GROUP, INC.

Principal Place of Business  
15266 SW 170 TERRACE  
MIAMI FL 33187

Mailing Address  
P.O. BOX 831477  
MIAMI FL 33283-1477

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/12/1995

4. FEI Number

65-0598917

Applied For  
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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 9044 SW 148 CT.

Suite, Apt. #, etc.

22

City & State  
23 MIAMI - FL

Zip Country

24 33196 25 U.S.A.

2a. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

RODRIGUEZ, SR., RAFAEL L  
15266 SW 170 TERRACE  
MIAMI FL 33187

10. Name and Address of New Registered Agent

81 Name

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

9044 SW 148 CT.

83

84 City

MIAMI

FL

85 Zip Code

33196

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 PD ☐ DELETE

NAME RODRIGUEZ, SR., RAFAEL L  
STREET ADDRESS 15266 SW 170 TERRACE  
CITY-ST-ZIP MIAMI FL 33187

TITLE VD ☐ DELETE

NAME RODRIGUEZ, JR., RAFAEL L  
STREET ADDRESS 15266 SW 170 TERRACE  
CITY-ST-ZIP MIAMI FL 33187

TITLE SD ☐ DELETE

NAME RODRIGUEZ, RONALD  
STREET ADDRESS 15266 SW 170 TERRACE  
CITY-ST-ZIP MIAMI FL 33187

TITLE TD ☐ DELETE

NAME RODRIGUEZ, ROBERT  
STREET ADDRESS 15266 SW 170 TERRACE  
CITY-ST-ZIP MIAMI FL 33187

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 ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 9044 SW 148 CT  
1.4 CITY-ST-ZIP MIAMI-FL 33196

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS 24 CALABRIA AVE #6  
2.4 CITY-ST-ZIP CORAL GABLES, FL 33134

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS 9044 SW 148 CT.  
3.4 CITY-ST-ZIP MIAMI-FL 33196

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS 9044 SW 148 CT  
4.4 CITY-ST-ZIP MIAMI-FL 33196

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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: Rafael L. Rodriguez Sr. SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 04-29-99 Daytime Phone # 305-408-7017

CR2E034 (11/98)