

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90426 032 ***158.75

DOCUMENT # P97000063361
1. Entity Name

RADIS INVESTMENT GROUP INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2103 Sycamore Lane East

3. Mailing Address

2103 Sycamore Lane East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Plant City Florida

City & State

Plant City Florida

4. FEI Number

65-0779094

Applied For

Not Applicable

Zip
33566

Country
U.S.A.

Zip
33566

Country
U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name ORTIZ-GARCIA RICARDO

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

2103 Sycamore Lane East

City Plant City

FL

Zip Code 33566

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME ORTIZ-GARCIA RICARDO
STREET ADDRESS 2103 SYCAMORE LANE EAST
CITY-ST-ZIP PLANT CITY, FLORIDA 33566

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICARDO ORTIZ-GARCIA
PRESIDENT

Date

4/29/03

Daytime Phone #

(813) 752-0258

CR2E034B (12/01)