## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 08, 2000 8:00 am Secretary of State DOCUMENT # P99000052666 1. Entity Name RIN AND KNATT, INC. 08-08-2000 90092 008 \*\*\*150.00 Principal Place of Business Mailing Address 12735 S. DIXIE HIGHWAY 12735 S. DIXIE HIGHWAY MIAMI FL 33156 MIAMI FL 33156 2. Principal Place of Business 630 CKANDON Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For ጋ ፩ ፬ Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NEDTRANON, KULNADDA Street Address (P.O. Box Number is Not Acceptable) 12735 S. DIXIE HIGHWAY **MIAMI FL 33156** 630 CRANDON BLUD 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. (NOTE: Registered Agent signature required when reinstating) nt and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Addition TITLE NEDTRANON, KULNADDA NAME NAME 630 CRANDON BLUD #16 STREET ADDRESS 12735 S. DIXIE HIGHWAY STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33156 TITLE ☐ Delete TITLE SIRIPHAN ENATTORGCOME C30 CRAMBON BLUD #20 KEY BISCAYAS, FR SIRIPHAN KNATTONG-COME NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 Block 12 if changed, or on an attachment with an address, with all other like empowered. changed, or on an attachment with

SIGNATURE:

## Rin & Knatt, Inc.

Abochment 459000052660 A0071939 630 Crandon Boulevard Unit 10 Key Biscayne, Florida 33149

Phone (305) 361-7769 Fax (305) 361-7769

August 03, 2000

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

To Whom it May Concern,

We are enclosing our 2000 Uniform Business Report along with the filing fee.

We would greatly appreciate if you would waive the late charge as we changed our address and did not receive the original report.

Thank you for your kind attention in this matter.

Sincerely,

Kulnadda Nedtranon, President

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