

FILED
May 29, 2002 8:00 am
Secretary of State

04-28-2002 90772 008 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000086590

1. Entity Name

3R NEW VENTURES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8201 SW 42nd St.

Suite, Apt. #, etc.

3. Mailing Address

8201 SW 42nd St.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami FL

Zip

33155

Country

USA

Zip

33155

Country

USA

4. FEI Number

Applied for 65-1051099

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name ERNESTO RIVERO

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

8201 SW 42nd St.

City Miami

FL

Zip Code

33155

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 date if applicable.

(NOTE: Registered Agent signature required when renouncing)

April 16 / 2002

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	DIRECTOR
NAME	Rene Rivero
STREET ADDRESS	8201 SW 42nd St, Miami, FL
CITY - ST - ZIP	33155
TITLE	C.P.D
NAME	ERNESTO RIVERO
STREET ADDRESS	8201 SW 42nd St. Miami, FL
CITY - ST - ZIP	33155
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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DO NOT WRITE
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 or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 16 / 2002

Date

Daytime Phone #

CR2E034B (12/01)