

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 16, 2001 8:00 am**  
**Secretary of State**

02-16-2001 90002 037 \*\*\*150.00

0231384

**DOCUMENT # F97000003685**

1. Entity Name  
**RAFOSS HOMES, INC.**

Principal Place of Business

% ALMO CATTANI  
 1001 NW 127TH PL.  
 MIAMI FL 33182

Mailing Address

% ALMO CATTANI  
 1001 NW 127TH PL.  
 MIAMI FL 33182

**00022115**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **06-1165631**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CATTANI, ALMO**  
**1001 NW 127TH PL.**  
**MIAMI FL 33182**

Name

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

City

**FL**

Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME              | STREET ADDRESS                          | CITY-ST-ZIP                 | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|-------------------|---|-----------------------------|-------|------|----------------|-------------|
|       | DP                |   |                             |       |      |                |             |
|       | NANDWANI, UTTAM C | CALLE J PRIBANCO, LOS ANGELES CASA L-17 | PANAMA 3 REPUBLIC OF PANAMA |       |      |                |             |
|       | DS                |   |                             |       |      |                |             |
|       | NANDWANI, RAM C   | CALLE J PRIBANCO, LOS ANGELES CASA L-17 | PANAMA 3 REPUBLIC OF PANAMA |       |      |                |             |
|       | D                 |   |                             |       |      |                |             |
|       | CHUGANI, MURLI K  | CALLE J PRIBANCO, LOS ANGELES CASA L-17 | PANAMA 3 REPUBLIC OF PANAMA |       |      |                |             |
|       | DV                |   |                             |       |      |                |             |
|       | CATTANI, ALMO     | 1001 NW 127TH PL.                       | MIAMI FL 33182              |       |      |                |             |
|       |                   |   |                             |       |      |                |             |
|       |                   |   |                             |       |      |                |             |

13. 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 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.

SIGNATURE: Almo Cattani  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 02/12/01 Daytime Phone #: 305-2277043

CR2E034 (10/00)