

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H93078

1. Entity Name

RITMO CORPORATION

FILED

Feb 15, 2001 8:00 am  
Secretary of State

02-15-2001 90047 032 \*\*\*150.00

Principal Place of Business

9600 NW 25TH ST  
#2C  
MAIMI FL 33172  
US

Mailing Address

9600 NW 25 ST  
#2C  
MAIMI FL 33172  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2179129

Applied For

Not Applicable

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

OLMSTEAD, ROSANNE L  
2601 S BAYSHORE DR  
16TH FL  
MIAMI FL 33133

Name

Quintana, J. Luis

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

338 Minorca Avenue

City

Coral Gables

FL

Zip Code  
33134

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

2/8/2001

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) ☐

**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 P  
NAME MANCIN, MAURICIO ☐ Delete  
STREET ADDRESS 6423 COLLINS AVE #509  
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AS  
NAME OLMSTEAD, ROSANNE L. ☒ Delete  
STREET ADDRESS 2601 S. BAYSHORE DR 16FL  
CITY-ST-ZIP COCONUT GROVE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V  
NAME MANCIN, PEDRO ☒ Delete  
STREET ADDRESS 9600 NW 25 ST  
CITY-ST-ZIP MIAMI FL

TITLE V  
NAME MANCIN, DANIEL ☐ Change ☒ Addition  
STREET ADDRESS 9600 NW 25 St  
CITY-ST-ZIP Miami, FL

TITLE ST  
NAME MOLINA, NESTOR ☒ Delete  
STREET ADDRESS 9600 NW 25 ST  
CITY-ST-ZIP MIAMI FL

TITLE ST  
NAME TAUB, ZULIA ☐ Change ☒ Addition  
STREET ADDRESS 9600 NW 25 St  
CITY-ST-ZIP Miami, FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/13/01

305 591 3940

CR2E034 (10/00)