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May 10, 1999 8:00 am
Secretary of State

05-10-1999 90236 018 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1998 1999.

DOCUMENT # J10509 (4)

1. Corporation Name

R.R.A. EXPORT & IMPORT CORP.

Principal Place of Business

**% ROBERTO M. RODRIGUEZ
935 SW 24TH RD
MIAMI FL 33129**

Mailing Address

**% ROBERTO M. RODRIGUEZ
935 SW 24TH RD
MIAMI FL 33129**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1986

4. FEI Number

59-2675978

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

Principal Place of Business

2a. Mailing Address

1. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

2. City & State

27. City & State

3. Zip

Country

28. Zip

Country

9. Name and Address of Current Registered Agent

**RODRIGUEZ, ROBERTO M.
935 SW 24TH RD
MIAMI FL 33129**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **DP**
STREET ADDRESS **RODRIGUEZ, ROBERTO M.**
CITY-ST-ZIP **935 SW 24TH RD
MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

14. TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 90, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 14 or on an attachment with an address.

SIGNATURE

Roberto M. Rodriguez 4/27/99 (305) 858-6005