2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2002 8:00 am
Secretary of State
07-15-2002 90183 041 ***150.00

DOCUMENT # J68516

1. Entity Name
RON EL ENTERPRISES, INC.

Principal Place of Business	Mailing Address
% RONALD CAPARDO 7027 W BROWARD BLVD PLANTATION FL 33317	% RONALD CAPARDO 7027 W BROWARD BLVD PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE

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 59-2805767 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAPARDO, RONALD
7027 W BROWARD BLVD
PLANTATION FL 33317

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ____________________
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 $550.00
After September 13, 2002 Fee will be $750.00
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	D CAPARDO, RONALD 9339 NW 47TH ST SUNRISE FL 33351	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/02)

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 REQUIRED [signature] 7/8/02 954 583-4566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment # Z688516

SHIPPLUS POSTAL & PACKING CTR.
7027 W. BROWARD BLVD.
PLANTATION CENTER
PLANTATION, FL. 33317-2208
(954) 583-4566 FAX 583-2529
EMAIL SHIPPLUS@BELLSOUTH.NET

120308

JULY 8,2002

TO: DIVISION OF CORPORATIONS

TO WHOM IT MAY CONCERN,
PLEASE BE ADVISED THAT WE DID IN FACT SEND IN OUR FILLING AND PAYMENT BACK IN APRIL OF THIS YEAR PRIOR TO THE DEADLINE OF MAY 1st. WE ISSUED A CHECK #7478 IN THE AMOUNT OF $150.00. UPON RECEIVING YOUR NOTICE IN THE MAIL ON JULY 2nd AND THUS CHECKING OUR LAST 2 BANK STATEMENTS NOT SHOWING THE CHECK NUMBER, WE MUST ASSUME THAT OUR GREAT POSTAL SYSTEM LOST THE ENVELOPE CREATING THIS CURRENT PROBLEM. AS PER OUR PHONE NOTIFICATION CALL TO YOUR OFFICE AND INSTRUCTIONS, PLEASE ACCEPT OUR PAYMENT AS ORIGINAL $150.00, WAIVING THE $550.00 FEE.

THANK YOU KINDLY,
RON CAPARDO,pres.

Ron Capardo