FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90195 003 ***150.00

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DOCUMENT # J85256 1. Corporation Name	
R, R & R RESOURCES, INC.	
• *	

Principal Place	e of Business	Mailing Address			
26 ADALIA AVE	ENUE	26 ADALIA AVENUE			
202 W. CARDY		TAMPA FL 33606		DO NOT INDITE IN T	IIC CDACE
TAMPA FL 3360	06	us		DO NOT WRITE IN TH	IIS SPACE
บร				3. Date Incorporated or Qualifed	
				05/21/1987	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26	ADALIA AYÊ	26		59-2893890	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
23 TH	IMPA FL	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24 336			30	Personal Property Tax.	☐ Yes ☐ No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	ea Agent
DAT.	TALE DAWALL V		81 Name	RATTAN PAWAN	'. K.
1	TAH, PAWAH K		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	/
	ADALIA AVENUE		20	SADAZIA AYE	
, TAM	IPA FL 33606		83	1 na PA	
_			84 City	7777	85 Zip Code
			84 City 7	AMP!T F	L 33786
11 Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the above-named co	proporation submits this statement for the purpose	of changing its registered
office or r	registered agent, or both, in the State	of Florida. Such change was au	thorized by the corpora	ation's board of directors. I hereby accept the ap	pointment as registered
agent. i a	1/2 1 1/2		ua Statutes,	4/28	199
SIGNATURE	Signature, typed or printed name of registered age		Registered Agent signature requ	uired when reinstating) DAYE	///
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	/ D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME V	RATTAN, VEENA		1.2 NAME		
STREET ADDRESS	CO ADALLA ALIFALLIF		1.3 STREET ADDRESS		
	TAMPA FL		1.4 CITY-ST-ZIP		
CITY-ST-ZIP	Z D	- DELETE	2.1 TITLE		☐ Change ☐ Addition
TITLE P	y -		2.2 NAME		·
NAME	RATTAN, PAWAN				
STREET ADDRESS	<i>i</i> =		2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETË	3.1 TITLE		Filotoniae Filotonia
NAME	ĺ		3.2 NAME		
STREET ADDRESS	6		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-\$T-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		1
STREET ADDRESS	6	•	4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
	' I		- 1		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		Fi per ete	5.4 CITY-ST-ZIP		Change Addition
TITLE		. DELETE	. 6.1 TITLE		☐ Change ☐ Addition
NAME		DELETE	6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
	3	DELETE	. 6.1 TITLE		☐ Change ☐ Addition

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _