

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M91725

1. Entity Name

RUSHING EMPIRE CORP.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90093 049 \*\*\*150.00

Principal Place of Business

Mailing Address

879 E. 25 STREET  
HIALEAH FL 33013  
US

C/O EVAN R. MARBIN  
879 EAST 25TH ST.  
HIALEAH FL 33013-3401

A000610Z



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

879 E 25 ST

12800 NW 7 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

HIALEAH FL

N. Miami FL

4. FEI Number

65-0067274

Applied For

Not Applicable

Zip

Country

33013 DADE

Zip

Country

33168 DADE

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

MARBIN, EVAN R.  
451 IVES DAIRY ROAD  
A103  
NORTH MIAMI BEACH FL 33179

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

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, 2000 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 ☐ Delete

NAME RUSHING, DEREK  
STREET ADDRESS 12800 NW 7TH AVE.  
CITY-ST-ZIP NO. MIAMI FL

TITLE VP ☐ Delete

NAME RUSHING, MIRIAM  
STREET ADDRESS 12800 NW 7TH AVE  
CITY-ST-ZIP NORTH MIAMI FL 33168

TITLE T ☐ Delete

NAME RUSHING, PATRICIA  
STREET ADDRESS 12800 NW 7TH AVE  
CITY-ST-ZIP NORTH MIAMI FL 33168

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 ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

*Patricia Rushing*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-2000

Date

305 688-6677

Daytime Phone #

CR2E034(9/99)