

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000017789

1. Entity Name
RYCY INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90130 021 ***150.00

Principal Place of Business

15582 SW 63RD TERRACE
MIAMI FL 33193

Mailing Address

15582 SW 63RD TERRACE
MIAMI FL 33193

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0981796

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PEREZ, EUGENIO G
15582 SW 63RD TERRACE
MIAMI FL 33193

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.

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, 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

TITLE PD
NAME PEREZ, EUGENIO G
STREET ADDRESS 15582 SW 63RD TERRACE
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE VD
NAME SOTO, YALIL G
STREET ADDRESS 15582 SW 63RD TERRACE
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE SD
NAME SOTO, YAMILA G
STREET ADDRESS 15582 SW 63RD TERRACE
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE TD
NAME RAMOS, CARIDAD S
STREET ADDRESS 15582 SW 63RD TERRACE
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE SD
NAME NAVAS, CRISTINA M
STREET ADDRESS 15582 SW 63RD TERRACE
CITY-ST-ZIP MIAMI FL 33193 ☐ Delete

TITLE D
NAME PEREZ, GEORGINA
STREET ADDRESS 13915 SW 90TH AVE #B-212
CITY-ST-ZIP MIAMI FL 33176 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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NAME
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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 #

CR2E034 (10/00)