

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000030435

1. Entity Name

R S AUDITING, INC

FILED

Dec 18, 2002 8:00 A.M.
Secretary of State

Principal Place of Business

Mailing Address

4609 NW 3 AVE

4609 NW 3 AVE

POMPANO BEACH FL 33064

POMPANO BEACH FL 33064

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

65-0984068

Applied For

Not Applicable

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

SALLES, ROBSON R

4609 NW 3 AVE

POMPANO BEACH FL 33064

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, 2003 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 NAME STREET ADDRESS CITY-ST-ZIP	PTD SALLES, ROBSON R 4609 NW 3 AVE POMPANO BEACH FL 33064	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200009560192 12/17/02--01059--002 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200009560192 12/17/02--01059--003 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

ROBSON R. SALLES - president

12/05/02

(954) 532-1549

272

FLORIDA DEPARTMENT OF STATE
Division of Corporation
2001 / 2002 Uniform Business Report (UBR)
409 East Gaines Street
Tallahassee, FL 32399

Re: *Filing of Uniform Business Reports 2001 and 2002*

P0000030435
R S AUDITING, INC

To Whom It May Concern:

This letter is to inform you that we have never received the Uniform Business Report forms for the years 2001 and 2002 by the mail.

We would like to request you that you forgive all extra fees and penalties other than the primary fees of \$150.00 each year (totaling \$300) and accept the filling of our attached UBRs, which has been prepared by our accountant.

Any questions or concern, feel free to contact our accountant at (954) 782-4000 and speak to Mr. Breno Gomes.

Sincerely,



Robson Salles - President
R S AUDITING, INC.
4609 NW 3rd Ave
Pompano Beach, FL 33064