

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 07, 2002 8:00 am**  
**Secretary of State**

05-07-2002 90143 001 \*\*\*150.00  
 05-07-2002 90143 002 \*\*\*\*\*8.75

**DOCUMENT # P00000089746**

1. Entity Name  
**R.B.M. TRAVEL & TOURISM, INC.**

Principal Place of Business

11056 S.W. 152 CT  
 MIAMI FL 33196

Mailing Address

11056 S.W. 152 CT  
 MIAMI FL 33196

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

8205 SW 152 AV Apt 101

Suite, Apt. #, etc.

8205 SW 152 AV Apt 101

City & State

Miami FL

City & State

Miami FL

Zip

33193

Country

Zip

33193

Country

4. FEI Number

65-1051995

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

REYES, JESUS G  
 11056 S.W. 152 CT  
 MIAMI FL 33196

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, 2002: 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 ☐ Delete  
 NAME DP  
 STREET ADDRESS REYES, JESUS G  
 CITY-ST-ZIP 11056 S.W. 152 CT  
 MIAMI FL 33196

TITLE ☐ Delete  
 NAME VP  
 STREET ADDRESS MENDOZA, GLENDA O  
 CITY-ST-ZIP 11056 S.W. 152 CT  
 MIAMI FL 33196

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 ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME DP  
 STREET ADDRESS REYES, Jesus G  
 CITY-ST-ZIP 8205 SW 152 AV Apt 101  
 Miami FL 33193

TITLE ☒ Change ☐ Addition  
 NAME VP  
 STREET ADDRESS MENDOZA, Glenda O  
 CITY-ST-ZIP 8205 SW 152 AV Apt 101  
 Miami FL 33193

TITLE ☐ Change ☐ Addition  
 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  
 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:

*Jesus B. Gregorio Reyes B.* 04-24-02 305 4083711

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)