

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State
 05-14-2001 90066 033 ***150.00

DOCUMENT # P00000097116

1. Entity Name
R&T TOBACCO CORP.

Principal Place of Business
11510 S.W. 32ND STREET
MIAMI FL 33165

Mailing Address
11510 S.W. 32ND STREET
MIAMI FL 33165

2. Principal Place of Business
8379 S.W. 40th St
 Suite, Apt. #, etc.

3. Mailing Address
8379 S.W. 40th St
 Suite, Apt. #, etc.

City & State
MIAMI, FLA
 Zip
33155
 Country
USA

City & State
MIAMI, FLA
 Zip
33155
 Country
USA

4. FEI Number
65-1057742

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

RAMIREZ, OLGA
11510 S.W. 32ND STREET
MIAMI FL 33165

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 **D** ☐ Delete
 NAME **RAMIREZ, OLGA**
 STREET ADDRESS **11510 S.W. 32ND STREET**
 CITY-ST-ZIP **MIAMI FL 33165**

TITLE **D** ☒ Delete
 NAME **RAMIREZ, OLGA**
 STREET ADDRESS **11510 S.W. 32ND STREET**
 CITY-ST-ZIP **MIAMI FL 33165**

TITLE **D** ☐ Delete
 NAME **TRIANA, ANTONIO**
 STREET ADDRESS **11510 S.W. 32ND STREET**
 CITY-ST-ZIP **MIAMI FL 33165**

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 **D** ☐ Change ☒ Addition
 NAME **YVONNE M. TRIANA**
 STREET ADDRESS **11267 S.W. 112th Circle LANE EAST**
 CITY-ST-ZIP **MIAMI, FLA. 33176**

TITLE **D** ☐ Change ☒ Addition
 NAME **LEONARDO RAMIREZ**
 STREET ADDRESS **11510 S.W. 32ND ST**
 CITY-ST-ZIP **MIAMI, FLA. 33165**

TITLE **D** ☒ Change ☐ Addition
 NAME **ANTONIO TRIANA**
 STREET ADDRESS **11267 S.W. 112th Circle LANE EAST**
 CITY-ST-ZIP **MIAMI, FL. 33176**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)