

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90437 043 ***150.00

DOCUMENT # **PO10000005106**
1. Entity Name
R & B OF CHICAGO, INC. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 6710 WINKLER ROAD Suite, Apt. #, etc. #7 City & State FORT MYERS, FL Zip 33919 Country		3. Mailing Address 6710 WINKLER ROAD Suite, Apt. #, etc. #7 City & State FORT MYERS, FL Zip 33919 Country	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1085176	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name LAMB, JEFFREY R.
Street Address (P.O. Box Number is Not Acceptable) 868 106TH AVENUE N.
City NAPLES FL Zip Code 33919

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  **JEFFREY R. LAMB** DATE **04/26/02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

January 1 - May 1: Fee is \$150.00
After May 1: Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

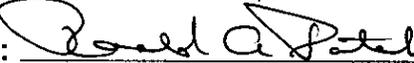
10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATAK, RONALD A. 6131 TIDEWATER ISLAND CIRCLE FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D F. BEAVEN SMITH 1644 DUKE OF WINDSOR ROAD VIRGINIA BEACH, VA 23454
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **RONALD PATAK** Date **4/30/02** Daytime Phone # **239-454-1166**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CDRE004B 149104