

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90089 044 ***150.00

DOCUMENT # P01000036321

1. Entity Name
RRBS CORPORATION

Principal Place of Business

145 MADEIRA AVENUE SUITE 310
CORAL GABLES FL 33134

Mailing Address

145 MADEIRA AVENUE SUITE 310
CORAL GABLES FL 33134

00001137



2. Principal Place of Business

9559 NW 28TH ST

3. Mailing Address

9559 NW 28TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-1100313

Applied For

Not Applicable

Zip

33065

Country

BROWARD

Zip

33065

Country

BROWARD

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

6. Name and Address of Current Registered Agent

SANCHEZ DE VARONA, RAUL J
 145 MADEIRA AVENUE SUITE 310
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name OSCAR R. AGUILAR

Street Address (P.O. Box Number is Not Acceptable)

1260 SW 142ND COURT

City

MIAMI

FL

Zip Code

33184

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 D
 NAME BONILLA, ROBERT R
 STREET ADDRESS 145 MADEIRA AVENUE SUITE 310
 CITY-ST-ZIP CORAL GABLES FL 33134

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT
 NAME ROBERTO RODRIGUEZ BONILLA
 STREET ADDRESS 9559 NW 28TH STREET
 CITY-ST-ZIP CORAL SPRINGS, FL 33065

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
 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 #

3/15/02 954-600-5569

CR2E034 (9/01)