

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

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

05-27-2002 90413 004 ***150.00

DOCUMENT # P01000096873

1. Entity Name

RP LOGistics & Management, Inc.
2305 NW

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2305 NW 107th.Ave.

Suite, Apt. #, etc.

Suite CU10 & FZ10a

City & State

Miami, FL

3. Mailing Address

2305 NW 107th. Avenue

Suite, Apt. #, etc.

Box # 28

City & State

Miami, FL

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1151735

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Puga, Rafael

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

2305 NW 107th. Ave, Ste CU10, Box28

City

Miami

FL

Zip Code

33172

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 resigning)

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☐

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	Director, President & Secretary
NAME	Puga, Rafael
STREET ADDRESS	2305 NW 107th.Ave Box 28
CITY- ST- ZIP	Miami, FL 33172
TITLE	Vice President
NAME	Valdes, Danubio A.
STREET ADDRESS	2305 NW 107th.Ave Box 28
CITY- ST- ZIP	Miami, FL 33172
TITLE	Vice President
NAME	Seidman, Marvin B.
STREET ADDRESS	2305 NW 107th. Ave Box 28
CITY- ST- ZIP	Miami, FL 33172
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
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NAME

STREET ADDRESS

CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

RAFAEL PUGA

4-25-02

305-477-9122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED34B (12/01)