FILED
Feb 27, 2002 8:00 am
Secretary of State
02-27-2002 90062 019 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000122247

1. Entity Name
R & S Investments Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8815 Conroy Windermere Rd #182	8815 Conroy Windermere Rd
Suite, Apt. #, etc. #182	Suite, Apt. #, etc. #182
City & State Orlando FL	City & State Orlando FL
Zip 32835 County USA	Zip 32835 County USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 36-0005313 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Sean Barrett

Street Address (P.O. Box Number is Not Acceptable): 8308 Vintage Dr

City: Orlando FL Zip Code: 32835

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 changing) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President Sean Barrett 8308 Vintage Dr. Orlando FL 32835
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Diana David 14568 Laguna Beach Cir Orlando FL 32837
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CR2E034B (12/01)

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: Sean Barrett 1/26/01 407.361.6608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #