

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2003 8:00 am
Secretary of State

03-06-2003 90118 025 ***150.00

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1. Entity Name
R.L.A. INVESTMENTS CORP.



Principal Place of Business

~~169 EAST FLAGLER STREET~~
~~SUITE 1527~~
~~MIAMI FL 33131~~

Mailing Address

~~169 EAST FLAGLER STREET~~
~~SUITE 1527~~
~~MIAMI FL 33131~~

2. Principal Place of Business

6190 Hollywood Blvd

Suite, Apt. #, etc.

3. Mailing Address

6190 Hollywood Blvd

Suite, Apt. #, etc.

City & State
Hollywood, Florida

City & State
Hollywood, Florida

4. FEI Number

43-1967783

Applied For

Not Applicable

Zip
33024

Country
USA

Zip
33024

Country
USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMPSON, DISNEY D ESQ.
169 EAST FLAGLER STREET
SUITE 1527
MIAMI FL 33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **ALVAREZ, RODOLFO L**
STREET ADDRESS **169 EAST FLAGLER STREET #1527**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **D** ☐ Delete
NAME **BARRERO-LEON, ARACELY**
STREET ADDRESS **169 EAST FLAGLER STREET #1527**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **D** ☐ Delete
NAME **BARRERO, RODOLFO L**
STREET ADDRESS **169 EAST FLAGLER STREET #1527**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **D** ☐ Delete
NAME **LEON-BARRERO, JENNY A**
STREET ADDRESS **169 EAST FLAGLER STREET #1527**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rodolfo L. Alvarez 03/04/03

Date

Daytime Phone #

CR2E034 (10/02)