

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000039369

1. Entity Name

RS ARTISTS, INC.

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90113 014 \*\*\*150.00

Principal Place of Business

%STEVEN E. GOLDMAN  
1221 BRICKELL AVE.  
MIAMI FL 33131

Mailing Address

%STEVEN E. GOLDMAN  
1221 BRICKELL AVE.  
MIAMI FL 33131

2. Principal Place of Business

Suite, Apt. #, etc.

2100

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

2100

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0433867

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GOLDMAN, STEVEN E  
5757 COLLINS AVE  
PH2  
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name

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

1221 BRICKELL AVENUE, SUITE 2100

City

Miami

FL

Zip Code

33131

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.

STEVEN E. GOLDMAN

(NOTE: Registered Agent signature required when reinstating)

24 April 2001

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, 2001 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 DPT ☐ Delete  
NAME GOLDMAN, STEVEN E  
STREET ADDRESS 5757 COLLINS AVE PH2  
CITY-ST-ZIP MIAMI BEACH FL 33155

TITLE DS ☐ Delete  
NAME ULLOA, RICHARD  
STREET ADDRESS 6705 SW 147 CT.  
CITY-ST-ZIP MIAMI FL 33193

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE 1221 BRICKELL AVENUE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS #2100  
CITY-ST-ZIP Miami, FL 33131

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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

STEVEN E. GOLDMAN

24 April 2001

Date

Daytime Phone #

305.579.0561

CR2E034 (10/00)