## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000084448 (8)

R.R.C. ENTERPRISES, INC.

## **FILED** Feb 03 1998 8:00am Secretary of State



required by Chapter 602 Florida Statutes; and that my name appears in PLES (DE N) 01-15-18

Principal Place of Business Mailing Address 2100 N.W. 20TH ST. MIAMI FL 33142 2100 N.W. 20TH ST. MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/10/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0453940 Not Applicable Suite, Apt. #, etc. Suite, Apt. # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζıp Country This corporation owes or has paid the current fear Intangible Yes □ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RONDONA, RUBEN 2100 N.W. 20TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI FL 33142 **B3** Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE D 1.1 TITLE RONDONA, RUBEN NAME 1.2 NAME CR2E034 2100 N.W. 20TH ST. STREET AODRESS 1.3 STREET ADDRESS **MIAMI FL 33142** CITY-ST-ZIP 1.4 CITY - ST - 7IP ☐ DELETE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TOTLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 THILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or engine attachment with an address.