

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000012947

1. Entity Name

RAPID MOVERS, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90065 035 ***150.00

Principal Place of Business

6807 COLLINS AVE
 STE 217
 MIAMI BCH FL 33141
 US

Mailing Address

6807 COLLINS AVE
 STE 217
 MIAMI BCH FL 33141-3243
 US

2. Principal Place of Business

18060 W. DIXIE HWY

3. Mailing Address

18060 W. DIXIE HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

AVENTURA FL

City & State

AVENTURA, FL

4. FEI Number

65-0560283

Applied For

Not Applicable

Zip

33160

Country

DAPE

Zip

33160

Country

DAPE

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRAINI, J. C
 6807 COLLINS AVE
 MIAMI BCH FL 33141

Name J.C. TRAINI

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

18060 W. DIXIE HWY

City AVENTURA

FL

Zip Code 33160

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 reinstating)

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD ☐ Delete

NAME TRAINI, JAMES C
 STREET ADDRESS 6807 COLLINS AVE
 CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE VTD ☐ Delete

NAME RODRIGUEZ, H J
 STREET ADDRESS 6807 COLLINS AVE
 CITY-ST-ZIP MIAMI BCH FL 33141

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

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS 18060 W. DIXIE HWY
 CITY-ST-ZIP AVENTURA, FL 33160

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS 18060 W. DIXIE HWY
 CITY-ST-ZIP AVENTURA, FL 33160

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

Date

Daytime Phone #

CR2E034 (9/99)