

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90112 019 ***550.00

DOCUMENT # P95000039368

1. Entity Name
RION HOLDINGS INTERNATIONAL, INC.



Principal Place of Business
7606 PEBBLE CREEK CIRCLE
#202
NAPLES FL 34108
US

Mailing Address
7606 PEBBLE CREEK CIRCLE
#202
NAPLES FL 34108
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
23650 Via Veneto
 Suite, Apt. #, etc.
#702
 City & State
Bonita Springs
 Zip
34134 Country
Lee

3. Mailing Address
23650 Via Veneto
 Suite, Apt. #, etc.
#702
 City & State
Bonita Springs
 Zip
34134 Country
Lee

4. FEI Number **65-0712361**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

WEINBERGER, MARION
7606 PEBBLE CREEK CIRCLE
#202
NAPLES FL 34108

7. Name and Address of New Registered Agent

Name
Weinberger Marion
 Street Address (P.O. Box Number is Not Acceptable)
23650 Via Veneto
#702
 City
Bonita Springs FL Zip Code
34134

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 **M. Weinberger** **M. Weinberger** **July 5/01**
 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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 | D | <input type="checkbox"/> Delete |
| NAME | WEINBERGER, MARION L | |
| STREET ADDRESS | 7606 PEBBLE CREEK CIR #202 | |
| CITY-ST-ZIP | NAPLES FL 34108 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | WEINBERGER, ERIC | |
| STREET ADDRESS | 7606 PEBBLE CREEK CIR #202 | |
| CITY-ST-ZIP | NAPLES FL 34108 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|------------------------------|--|
| TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Weinberger, Marion L | |
| STREET ADDRESS | 23650 Via Veneto #702 | |
| CITY-ST-ZIP | Bonita Springs 34134 | |
| TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Weinberger, Eric | |
| STREET ADDRESS | 23650 Via Veneto #702 | |
| CITY-ST-ZIP | Bonita Springs 34134 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: **M. Weinberger** **July 5/01** **992-6060**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0096302 AV

CR2E034 (5/01)