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## **2001 UNIFORM BUSINESS REPORT (UBR)**

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## FILED Apr 12, 2001 8:00 am Secretary of State DOCUMENT # P9500061311 1. Entity Name R T & C HOLDINGS, INC. 04-12-2001 90100 001 \*\*\*300.00 Principal Place of Business Mailing Address 1985 N.W. 88TH COURT 1985 N.W. 88TH COURT SUITE 101 SUITE 101 MIAMI FL 33172 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt..#, etc. Suite, Apt., #, etc.,... DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0601349 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RODRIGUEZ, MARIANO J Street Address (P.O. Box Number is Not Acceptable) 1985 N.W. 88TH COURT SUITE 101 MIAMI FL 33172 City 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. **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 9. This corporation is eligible to satisfy its Intangible ~10.-Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) Change TITLE □ Delete TITLE ☐ Addition NAME RODRIGUEZ, MARIANO J NAME STREET ADDRESS STREET ADDRESS 1985 N.W. 88TH CT. #101 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 TITLE ☐ Delete ☐ Change ☐ Addition NAME TRUEBA, CARLOS M NAME STREET ADDRESS 1985 N.W. 88TH CT. #101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33172** ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.