

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000074603

1. Entity Name

RUBYMAR INTERNATIONAL, INC.

FILED
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90038 042 ***150.00

Principal Place of Business

2911 GRAND AVE
MIAMI FL 33145

Mailing Address

9719 HAMMOCKS BLVD
#J103
MIAMI FL 33196-2564

2. Principal Place of Business

Miami
2911 Grand Ave FL 33145
Suite, Apt. #, etc.

3. Mailing Address

15170 SW 113 St
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0616892

Applied For

Not Applicable

Zip

Country

33145 U.S.A

Zip

Country

33196 U.S.A

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MADRID, MARIANELLA C
9719 HAMMOCKS BLVD J-103
MIAMI FL 33196

7. Name and Address of New Registered Agent

Name

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

City

FL

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

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

TITLE: VD
NAME: MADRID, MARIANELLA
STREET ADDRESS: 9719 HAMMOCKS BLVD., J-103
CITY-ST-ZIP: MIAMI FL 33196
15170 SW 113 St

TITLE: President
NAME: Julio C. Paternina
STREET ADDRESS: 15170 S.W 113 St
CITY-ST-ZIP: Miami FL 33196

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

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CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: President
NAME: Julio C. Paternina
STREET ADDRESS: 15170 S.W 113 St
CITY-ST-ZIP: Miami FL 33196
☐ Change ☒ Addition

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

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

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

April 24, 2000

Date

3854531

Daytime Phone #

CR2E034 (9/99)