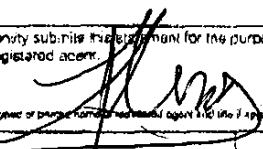


FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90697 001 *3,758.75

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P95000088631					
1. Entity Name R & F REAL ESTATE HOLDINGS, INC.					
Principal Place of Business 9350 S DIXIE HWY 1500 MIAMI, FL 33156			Mailing Address 9350 S DIXIE HWY 1500 MIAMI, FL 33156		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FE Number 66-0837851				Applied For Not Applicable	
5. Certificate of Status Desired ☐				8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SEGREDO, FRANK J ESQ. 9350 S DIXIE HWY 1500 MIAMI, FL 33156					
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE:  (NOTE: Registered Agent signature required when withdrawing)					
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$650.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 may be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	ROSENTHAL EDWIN M		NAME		
STREET ADDRESS	19355 TURNBERRY WAY, APT. 18GR		STREET ADDRESS		
CITY- ST- ZIP	AVENTURA, FL. 33180		CITY- ST- ZIP		
TITLE	VPT	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	RAMOS, HECTOR		NAME		
STREET ADDRESS	19355 TURNBERRY WAY, APT. 18GR		STREET ADDRESS		
CITY- ST- ZIP	AVENTURA, FL. 33180		CITY- ST- ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	ROSENTHAL, NORMA		NAME		
STREET ADDRESS	19355 TURNBERRY WAY, APT. 18GR		STREET ADDRESS		
CITY- ST- ZIP	AVENTURA, FL. 33180		CITY- ST- ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ 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		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.					
SIGNATURE:  09/01/2004					
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

66412821



01072004 Chg-P CR2E034 (10/03)