

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000006307**

1. Entity Name

RT BUSINESS CORPORATION**FILED**
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90079 004 ***150.00

Principal Place of Business

**11610 QUAIL ROOST DR
MIAMI FL 33197**

Mailing Address

**C/O FINANZAS, INC
85 GRAND CANAL DRIVE, STE 305
MIAMI FL 33144-2569**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0634805

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent****TAPANES, ROGER
11880 SW 5 ST.
MIAMI FL 33184****7. Name and Address of New Registered Agent**

Name

Roger Tapanes Jr.

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

8240 S.W. 27 St.

City

Miami**FL**

Zip Code

33155

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 NAME STREET ADDRESS CITY-ST-ZIP | DP TAPANES, ROGER 11880 SW 5 ST MIAMI FL 33184 | <input checked="" type="checkbox"/> Delete |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP Roger Tapanes Jr. 8240 S.W. 27 St. Miami, FL 33155 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> 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

Roger Tapanes Jr.

Date

3-10-00

Daytime Phone #

(305) 234-4347

CR2E034 9/99