

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90047 003 ***150.00

DOCUMENT # P97000034341

1. Entity Name
R PLANTS, INC.



Principal Place of Business

1200 NW 78 AVE
216
MIAMI, FL 33186

Mailing Address

1200
216
MIAMI, FL 33126

94022398

2. Principal Place of Business

18100 SW 149 Ave.
Suite, Apt. #, etc.

3. Mailing Address

18100 Sw 149 Ave.
Suite, Apt. #, etc.

02212004 Chg-P CR2E034 (10/03)



City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0771301

Applied For

Not Applicable

Zip

33187

Country

USA

Zip

33187

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RODRIGUEZ, VICTOR JR
1200 NW 78 AVE
STE 216
MIAMI, FL 33126

7. Name and Address of New Registered Agent

Name

Raul E Pastran

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

333 NE 8 St.

City

Homestead

FL

Zip Code

33030

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/24/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution, ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
RODRIGUEZ, VICTOR JR
14747 SW 260 STREET
HOMESTEAD, FL 33032 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
RODRIGUEZ, VICTOR SR
14747 SW 260 STREET
HOMESTEAD, FL 33032 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

18100 SW 149 Ave.
Miami, FL 33187 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
Rodriguez, Katiuska
18100 SW 149 Ave.
Miami, FL 33187 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 10 or Block 11 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

2/24/04

Date

Daytime Phone #

(305)970-1603