2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Apr 27, 2001 8:00 am Secretary of State DOCUMENT # P98000011884 R & J MOTORS, INC. 04-27-2001 90330 011 ***150.00 Principal Place of Business Mailing Address 832 SW 22ND AVE 410 NW 57TH COURT MIAMI FL 33135 MIAMI FL 33126 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0820068 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUIZ, CANDIDA Street Address (P.O. Box Number is Not Acceptable) 410 NW 57TH CT. **MIAMI FL 33126** Zip Code F 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, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TIT1 F Change ___ Addition RUIZ. CANDIDA NAME NAME STREET ADDRESS 410 NW 57 COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33126** TITLE ☐ Delete TITLE Change Addition GARCIA, ALBERTO NAME NAME 10011 HEATHER LANE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33025 TITLE ☐ Delete TETLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TETLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TOB F ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RUIZ

7 - 1 O 1 O 2

Daytime Phone #



CR2E034 (10/00)