

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000043680

1. Entity Name
RALLINNI, CORP.

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

09-13-2000 90023 008 ***550.00

Principal Place of Business
5801 S.W. 185 WAY
FORT LAUDERDALE FL 33332

Mailing Address
5801 S.W. 185 WAY
FORT LAUDERDALE FL 33332

2. Principal Place of Business
2001 NW 167 ST.
Suite, Apt. #, etc.

3. Mailing Address
2001 NW 167 ST
Suite, Apt. #, etc.

City & State
Miami, FL
Zip
33054
Country
DADE

City & State
Miami, FL
Zip
33054
Country
DADE

4. FEI Number 65-0962074

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEAL & ROS
220 MIRCLD MILE
SUITE 206
CORAL GABLES FL 33134

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 P
NAME VILLAREAL, RAFAEL
STREET ADDRESS 5801 S.W. 185 WAY
CITY-ST-ZIP FORT LAUDERDALE FL 33332 ☐ Delete

TITLE VP
NAME VILLAREAL, ALINA
STREET ADDRESS 5801 S.W. 185 WAY
CITY-ST-ZIP FORT LAUDERDALE FL 33332 ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME VILLARREAL, Rafael
STREET ADDRESS 2001 NW 167 ST.
CITY-ST-ZIP MIAMI, FL 33054 ☐ Change ☐ Addition

TITLE VP
NAME VILLARREAL, Alina
STREET ADDRESS 2001 NW 167 ST.
CITY-ST-ZIP MIAMI, FL 33054 ☐ 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

TITLE
NAME
STREET ADDRESS
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: Alina D. Villarreal 9/10/00 305624-2125
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)