

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90204 023 ***150.00

DOCUMENT # P98000058021

1. Entity Name

R & R MORTGAGE CORPORATION

Principal Place of Business

Mailing Address

1298 NORTHEAST 98TH STREET
 MIAMI SHORES FL 33138-2561

1298 NORTHEAST 98TH STREET
 MIAMI SHORES FL 33138-2561

2. Principal Place of Business

3. Mailing Address

710 NE. 126th St.

Suite, Apt. #, etc.

North Miami, Fl

City & State

Suite, Apt. #, etc.

City & State



DO NOT WRITE IN THIS SPACE

Zip
 33161-4823

Country

USA

Zip

Country

4. FEI Number

65-0846887

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LA BARRE, ROYAL
 1298 NE 98TH STREET
 MIAMI SHORES FL 33138

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

Royal La Barre

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTD LA BARRE, RUTH A 1298 NORTHEAST 98TH STREET MIAMI SHORES FL 33138-2561	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

Ruth A. La Barre

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-12-2000

CR2E034 (9/99)