

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000058021

1. Entity Name

R & R MORTGAGE CORPORATION

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90069 044 ***150.00

0168746

Principal Place of Business

~~710 N.E. 126TH ST.~~
~~MIAMI FL 33181~~

Mailing Address

~~9620 N.E. SECOND AVENUE, SUITE 202~~
~~MIAMI SHORES FL 33138-2749~~

607905

2. Principal Place of Business

9620 N.E. Second Ave Suite 202

3. Mailing Address

1298 N.E. 98th St.

Suite, Apt. #, etc.

Miami Shores, FL

Suite, Apt. #, etc.

Miami Shores, FL

City & State

33138-2749 USA

City & State

33138-2561 USA

Zip

Country

Zip

Country

4. FEI Number

65-0846887

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

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

Royal La Barre

1-17-2001

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PVTD
NAME LA BARRE, RUTH A
STREET ADDRESS 1298 NORTHEAST 98TH STREET
CITY-ST-ZIP MIAMI SHORES FL 33138-2561 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/2001 305-759-4800
Date Daytime Phone #

CR2E034 (10/00)