

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2008 8:00 am
Secretary of State

01-28-2008 90046 034 ***163.75

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1. Entity Name
TETRA "R" INVESTMENT, INC.



Principal Place of Business
1770 SW 8TH ST
MIAMI, FL 33135 US

Mailing Address
1770 SW 8TH ST
MIAMI, FL 33135 US

40011451



01212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0851960

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ALVARO CASTILLO B., P.A.
1390 BRICKELL AVE, SUITE 200
MIAMI, FL 33131

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IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUIZ, ENRIQUE
STREET ADDRESS	10340 NW 5 TERR
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	RUIZ, ROBERTO
STREET ADDRESS	6108 SW 133 PL
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	D
NAME	RUIZ, HORACIO
STREET ADDRESS	10730 SW 121 CT
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	D
NAME	RUIZ, EDUARDO
STREET ADDRESS	10315 NW 9TH ST, CIR 302
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	RUIZ, JOSE
STREET ADDRESS	7764 SW 157 AVE
CITY-ST-ZIP	MIAMI, FL 33193
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

1-20-08

Date

305-649-1102

Daytime Phone #