

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90246 020 ***150.00

DOCUMENT # P98000082553

1. Corporation Name

R.B.E. WORLDWIDE INC.



Principal Place of Business

3809 SW 142ND AVENUE
MIAMI FL 33182

Mailing Address

3809 SW 142ND AVENUE
MIAMI FL 33182

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/21/1998

4. FEI Number

65-0866396

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 750 NW 134 PLACE

Suite, Apt. #, etc.

22 City & State

23 Miami, FL

Zip

24 33182

Country

25 USA

2a. Mailing Address

26 750 NW 134 PLACE

Suite, Apt. #, etc.

27 City & State

28 Miami, FLORIDA

Zip

29 33182

Country

30 USA

9. Name and Address of Current Registered Agent

ALVAREZ, ELIZABETH
750 NW 142ND AVENUE
MIAMI FL 33182

10. Name and Address of New Registered Agent

81 Name ELIZABETH ALVAREZ

82 Street Address (P.O. Box Number is Not Acceptable)

750 NW 134 PLACE

83

84 City

MIAMI

FL

85 Zip Code

33182

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

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

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

4/19/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ELIZABETH ALVAREZ

STREET ADDRESS 750 NW 134 PLACE

CITY-ST-ZIP MIAMI FLORIDA 33182

TITLE ☐ DELETE

NAME VICE President

STREET ADDRESS Odalys Pipp

CITY-ST-ZIP 21660 NW 3rd PLACE

21660 NW 3rd PLACE

SECREATARY

NAME ALMA B. SILVA

STREET ADDRESS 3809 SW 142nd Ave.

CITY-ST-ZIP MIAMI, FL 33175

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if change, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(Signature typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034 (1/98)