FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 03, 2001 8:00 am Secretary of State DOCUMENT # P98000101781 1. Entity Name RRSR, INC. 04-03-2001 90022 011 \*\*\*158.75 Principal Place of Business Mailing Address 5100 ROTHSCHILD DRIVE 5100 ROTHSCHILD DRIVE CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0880986 340 3344 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICE, RICHARD R JR 1538 S.E. 11th Street Street Address (P.O. Box Number is Not Acceptable) 5100 ROTHSCHILD DRIVE Deerfield Beach, FL CORAL SPRINGS FL-33067 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME RICE, RICHARD R JR. 1538 S.E. 11th St STREET ADDRESS STREET ADDRESS 9400 ROTHSCHILD DR CORAL SPRINGS FL 23067 Deerfield Bch. FL CITY-ST-ZIP CITY-ST-ZIP □ Delete 3344 FITLE ☐ Change ☐ Addition TITLE STD NAME NAME RICE, SHEILA G 5100 ROTHSCHILD DR 1538 S.E. II Th St. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COBAL SPRINGS FL 33087 Deerfield Boh FL CITY-ST-ZIP \_\_\_ Delete 3344/ TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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:
Richard R. Rice Jr.
3-27-01
954-755-4371