

2000 UNIFORM BUSINESS REPORT (UBR)

5/23/00-90228-037-\$150.00-\$150.00

DOCUMENT # P99000003805

1. Entity Name

THE RICAN GROUP CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 SEP 27 AM 7:44

Principal Place of Business
17 SOUTH STATE ROAD #7
PLANTATION FL 33317

Mailing Address
POB 160507
HIALEAH FL 33016-0009

2. Principal Place of Business

1250 SW 27 Ave

3. Mailing Address

Suite, Apt. #, etc.

#207

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33135

Country

USA

Zip

33135

Country

USA



DO NOT WRITE IN THIS SPACE

4. FE Number

05-0885347

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARRION, RAQUEL L
2600 W. 60TH STREET
HIALEAH FL 33016

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

RAQUEL CARRION
President
2600 W 60TH Hialeah FL 33016

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change

☐ Addition

TITLE
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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:

RAQUEL CARRION

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/4/00

Date

305 788 8641

Daytime Phone #

CR2E034 (5/00)

Never rec'd letter from
on June 5:00
came my attention when
rec'd the notice that
there have a problem
contacted office

Shawn spoke at

3:10pm 8/9/00

gave me details

Thank you
Raguel