2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900011529 1. Entity Name FILEB DECKETARY OF STATE RP GLOBAL GROUP, INC. VISION OF CORPORATION 00 SEP 25 AM 8: 00 Principal Place of Business Mailing Address 2695 SOUTHWEST 28TH AVENUE 2695 SOUTHWEST 28TH AVENUE SUITE A SUITE A MIAMI FL 33133 **MIAMI FL 33133** 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number HRAH Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired れAMいしAI Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE **CORAL GABLES FL 33134** Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **PSTD** PSTD **DES**AGGITION TITLE TITLE ☐ Delete HALDONACO, IVAN F MALDONADO, IVAN F NAME NAME STREET ADDRESS STREET ADDRESS 2695 SOUTHWEST 28TH AVENUE 19163 NW 78. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 Addition Change DIrector ☐ Delete TITLE TITLE Lehcia D SANCHEZ MALDONAPO NAME NAME 19163 NW 78 Ct STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33015 CITY-ST-ZIP Addition Delete TITLE ☐ Change TITLE NAME NAME 600003408226 STREET ADDRESS STREET ADDRESS -09/28/00--01079--007 CITY-ST-ZIP ~ CITY-ST-ZIP *******150.00 ****150.00 ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIE ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP 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 release empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if or on an attachment with SIGNATURE:

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To Whom It may Concern:

This is the second time we are filing this report. Our first check, # 1076 remains uncashed, and we did not receive confirmation that the State received our renewal. Check #1076 was mailed in March of 2000 along with a form that was due May 15th. During the same month of March we also sent a request to voluntarily dissolve the corporation, and no information was sent to us regarding this matter either. A check for \$35.00 was sent to the same address with the paperwork downloaded from the internet, and that check, check #1097 was also not cashed.

At this point, because we have incurred debt in the months we have been waiting to dissolve, we are advised we cannot dissolve the corporation. therefore, kindly advise what we can do now, since at this point it looks as if we may end up owing the state fees we should have not incurred in the first place.

Cordially,

Ivan Maldonado (305) 829-4081 Work phone