

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 16, 2001 8:00 am**  
**Secretary of State**

08-16-2001 90002 002 \*\*\*158.75

<b>DOCUMENT #</b>	<b>P99000018446</b>
<b>1. Entity Name</b> RAGGED & BRENZO INTERNATIONAL, CORP.	

<b>Principal Place of Business</b> 777 NW 72 AVENUE MIAMI FL 33126	<b>Mailing Address</b> 777 NW 72 AVENUE MIAMI FL 33126
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<b>2. Principal Place of Business</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc. 2H11	Suite, Apt. #, etc. 2H11
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

<b>4. FEI Number</b> 65-0910886	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> LARA, JUAN FELIPE 1006 BAY DRIVE SUITE #A-37 MIAMI BEACH FL 33141	
<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) 777 N.W. 72 Avenue, Suite 2H11 City Miami FL Zip Code 33126	

<b>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.</b>
<b>SIGNATURE</b> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> <input type="checkbox"/> (See criteria on back)	<b>FILE NOW!!! FEE IS \$550.00.</b> After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>11. OFFICERS AND DIRECTORS</b>		<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
<b>TITLE</b> PD <b>NAME</b> LARA, JUAN FELIPE <b>STREET ADDRESS</b> 1006 BAY DRIVE SUITE #A-37 <b>CITY-ST-ZIP</b> MIAMI BEACH FL 33141	<input type="checkbox"/> Delete	<b>TITLE</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> 777 N.W. 72 Avenue, Suite 2H11 <b>STREET ADDRESS</b> Miami, FL 33126 <b>CITY-ST-ZIP</b>	
<b>TITLE</b> SD <b>NAME</b> ARBELAEZ, JUAN FERNANDO <b>STREET ADDRESS</b> 1006 BAY DRIVE SUITE #A-37 <b>CITY-ST-ZIP</b> MIAMI BEACH FL 33141	<input type="checkbox"/> Delete	<b>TITLE</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b> 777 N.W. 72 Avenue Suite 2H11 <b>STREET ADDRESS</b> Miami, FL 33126 <b>CITY-ST-ZIP</b>	
<b>TITLE</b> <del>ROSE</del> <b>NAME</b> ROSE, MARIA HELENA <b>STREET ADDRESS</b> 1006 BAY DRIVE SUITE #A-37 <b>CITY-ST-ZIP</b> MIAMI BEACH FL 33141	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	

<b>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.</b>	
<b>SIGNATURE:</b> SIGNATURE REQUIRED	<b>Date</b> 08/25/01 <b>Daytime Phone #</b> 3052621963

CR2E034 (5/01)



Att achment  
A-0081449

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

August 2, 2001

RAGGED & BRENZO INTERNATIONAL, CORP.  
777 NW 72 AVENUE  
2 H 11  
MIAMI, FL 33126

Subject: **RAGGED & BRENZO INTERNATIONAL, CORP.**

Reference Number: **P99000018446**

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/sg

ANNUAL REPORTS SECTION

90

Attachment # P99000018446

**RAGGED & BRENZO INTERNATIONAL, CORP.**  
777 NW 72 AVENUE, SUITE 2H11  
MIAMI, FL 33126

~~1058~~  
A0084419

July 23, 2001

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Ref : 2001 UBR

Dear Sir or Madam:

We are writing this letter to respectfully request you one time abatement of the penalty for late filing of the UBR annual report for the year 2001, since it is just now that we received the form from you

Last Year our accountant had to prepare one for us in an old form, and many of the changes that we made on the form were not corrected on the form that you sent us. We are enclosing a copy of the report for your records. I am a foreign shareholder that travels continuously and many times I am not aware of the datelines for filing like this one.

Enclosed please find the processed form along with the dues. We appreciate your understanding and cooperation to this matter. Should you have any questions, please contact us at your convenience at 305-262-1963

Best regards,

  
Juan Felipe Lara  
President