## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## P99000035555 DOCUMENT #

1. Entity Name RP BILLING CORP.



Name

City

11.

TITLE

NAME

TITLE

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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Principal Place of Business 500 MM COMMICH DIVER DIVIN

RUBENSTEIN, LAWRENCE

the obligations of registered agent.

8320 NW 52 ST LAUDERHILL FL 33351

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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TITLE

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CITY-ST-ZIP

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NAME

: 10.

Mailing Address

| STE 16 BOCA RATON FL 33431     | LAUDERHILL FL 33351 |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |
| City & State                   | - City & State      |
| Zip Country                    | Zip Country         |

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

RUBENSTEIN, LAWRENCE

LAUDERHILL FL 33351

9001-SW 122ND AVE

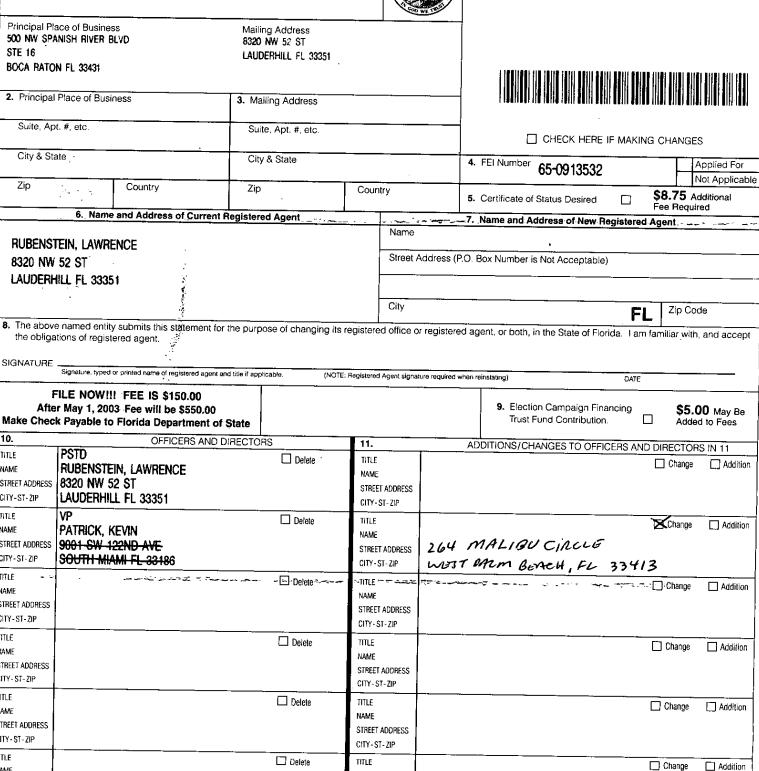
SOUTH MIAMI FL 33186

8320 NW 52 ST

PATRICK, KEVIN



02-19-2003 90164 041 \*\*\*150.00



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 10 or Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR