

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90241 050 ***150.00

DOCUMENT # 99000039103

1. Entity Name

RH & Sons, Inc. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3399 SW 142ave

Suite, Apt. #, etc.

Miramar

City & State

FLA

Zip

33027

Country

USA

3. Mailing Address

PO Box 170388

Suite, Apt. #, etc.

Dialah, FL

Zip

33017

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0384891

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MARITZA HENRIQUEZ

Street Address (P.O. Box Number is Not Acceptable)

3399 SW 142ave

City

Miramar

FL

Zip Code

33027

**DO NOT WRITE
IN THIS SPACE**

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:

Martiza Henriquez - MARITZA HENRIQUEZ

4/24/02

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) ☒

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	<u>Martiza Henriquez</u> <u>President</u> <u>3399 SW 142ave</u> <u>Miramar, FL 33027</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V-P</u> <u>Rafael Henriquez</u> <u>3399 SW 142ave</u> <u>Miramar, FL 33027</u>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Martiza Henriquez - MARITZA HENRIQUEZ

Date

Daytime Phone #

4/24/02 954-450-6647

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)