2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P99000080009 **DOCUMENT #** 1. Entity Name R & R MANUFACTURING GROUP, INC.



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90670 023 ***150.00

| Principal Plac 7880 W 20TH #46 HIALEAH FL 3 US | | 4344 PINE RID | Mailing Address 4344 PINE RIDGE COURT WESTON FL 33331 | | | 70029478 | | | |
|--|---|--------------------------------|---|---|---------------------|--|----------------------|-----------------|--|
| 2. Principal P | lace of Business | 3. Mailing Add | 3. Mailing Address | | | | | 88118 (BH) (BH) | |
| Suite, Apt. | #, etc. | Suite, Apt. # | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & Stat | е | City & State | City & State | | | 4. FEI Number 65-0947428 Applied For | | | |
| Zip Country | | Zip | Co | Country | | ertificate of Status Desired | \$8.75 ** | | |
| | 6. Name and Address of | Current Registered Agen | <u> </u> | | 7. N | ame and Address of New Registe | • | eu | |
| MARRERO 7880 W 20 #46 HIALEAH F 8. The above the obligati | TH AVE EL 33016 | ement for the purpose of cl | nanging its regist | City | ess (P.O. Bo | x Number is Not Acceptable) nt, or both, in the State of Florida. | FL Zip Coo | | |
| F) At(er | Signature, upod or printed name of regist LE NOW!!! FEE IS \$150 May 1, 2003 Fee will be \$ Payable to Florida Depart | .00 550.00 ment of State | - | ered Agent signature re | | Election Campaign Financing Trust Fund Contribution. , | ☐ Adde | 00 May Be | |
| TITLE NAME STREET ADDRESS | P MARRERO, RUBEN 4344 PINE RIDGE COURT WESTON FL 33331 | RS AND DIRECTORS | NA ST | TLE AME REET ADDRESS TY-ST-ZIP | ADD | ITIONS/CHANGES TO OFFICERS | AND DIRECTOR Change | RS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | _ □ Delete | | FLE IME REET ADDRESS TY-ST-ZIP | ☐ Change ☐ Addition | | Addition | | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | na Togano | | NA STI | ILE ME REET, ADDRESS IY-ST-ZIP | | مداد میراد در این ایراد در مراسد | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | NA Sti | LE ME REET ADDRESS 'Y-ST-ZIP | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | `` 🗆 o | NA STA | | | | ☐ Change | Addition | |
| TITLE HAME STREET ADDRESS SITY-ST-ZIP | ertify that the information curve | ed with this filing does not | NAI Ste Cit | ME REET ADDRESS Y-ST-ZIP | Castin | 9.07(3)(i), Florida Statutes. I further | ☐ Change | Addition | |

e fort 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 or director services to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if uses, with all other like empowered. of the corporation or the receiver or truste

SIGNATURE: