2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2003 8:00 am
Secretary of State
05-23-2003 90150 025 ***550.00

DOCUMENT # P99000081183

1. Entity Name
RAS DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
~~800 BRICKELL AVE., SUITE 550~~ ~~MIAMI, FL 33131~~	~~800 BRICKELL AVE., SUITE 550~~ ~~MIAMI, FL 33131~~

2. Principal Place of Business	3. Mailing Address
232 ANDALUSIA AVE	232 ANDALUSIA AVE
Suite, Apt. #, etc.: SUITE 300	Suite, Apt. #, etc.: SUITE 300
City & State: CORAL GABLES	City & State: CORAL GABLES
Zip: 33134 Country: MIAMI DADE	Zip: 33134 Country: MIAMI DADE

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-0948356 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
YANOWITCH, PETER ~~800 BRICKELL AVE., SUITE 550~~ ~~MIAMI, FL 33131~~	Name Street Address (P.O. Box Number is Not Acceptable): 232 ANDALUSIA AVE SUITE 350 City: CORAL GABLES FL Zip Code: 33134

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when attesting)

FILE NOW!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANCHEZ, RALPH 9540 JOURNEY'S END RD. CORAL GABLES, FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DOMINICIS, JORGE L 8200 SW 156 ST MIAMI, FL 33157	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RA YANOWITCH, PETER 800 BRICKELL AVE., SUITE 550 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jorge L Dominicis 5/20/03 305-446-5225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JORGE L. DOMINICIS
E.V.P.