

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90109 042 ***150.00

DOCUMENT # P99000084281

1. Entity Name

RUBAL & YERN INVESTMENTS, INC.



Principal Place of Business
7920 WEST DR UNIT 17
NORTH BAY VILLAGE FL 33141

Mailing Address
7920 WEST DR UNIT 17
NORTH BAY VILLAGE FL 33141

7920 West Dr

7920 West Dr.

2. Principal Place of Business

3. Mailing Address

Unit # 17

Unit # 17

Suite, Apt. #, etc.

Suite, Apt. #, etc.

North Bay Village

North Bay Village

City & State

City & State

FL.

FL.

Zip
33141

Country

Zip
33141

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0958589

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

YERN, DEBORAH

7920 WEST DR UNIT 17

NORTH BAY VILLAGE FL 33141

Name

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

City

FL

Zip Code

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 *Deborah Yern*

(NOTE: Registered Agent signature required when reinstating)

DATE

2-04-03

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
PD
RUBAL LOPEZ, RICARDO E
5501 3RD AVE., APT. 251
STOCK ISLAND, KEY WEST FL 33040

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VST
GOMEZ, VIVIAN Y
5501 3RD AVE., APT. 251
STOCK ISLAND, KEY WEST FL 33040

☐ Delete

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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:

Deborah Yern
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/03

305 757 1157

CR2E034 (10/02)