2000	UNIFORM BUSH	NESS REPO	rt (UBR)	_ ox
DÓCU	MENT # 199 0000	77531		FILED
1. Entity Nam	RRB EN. 2250 TYR ST. PETER	TERPRISES	lac.	00 JUL 27 AM : 4
D: : IB			33710	
Principal Plac	2250 TYROHE	Mailing Address Rlud 225	o Typone De	SECRETARY OF STATE TALLAHASSEE, FLORIDA
	ST. Peter Swy	57.	o Typone De Petemby Ica 33710	V.
2. Principal P	Place of Business	3. Mailing Address	, , , , , , , , , , , , , , , , , , , ,	
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE
City & State	е	City & State		4. FEI Number Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current Re	gistered Agent		7. Name and Address of New Registered Agent
BABUL AHMED			Name	
	2250 Tyrone 57. Petersber Fin 3371	Blod.	Street Addres	ss (P.O. Box Number is Not Acceptable)
	ST. Peters on	J.	City	FL ₍ Zip Code
0 Thb	FC/1 35/1	on surpose of phonoing its re	pointered office or regis	
a. The above	named entity submits this statement for tr	ne purpose of changing its re	gistered office or regis	stered agent, or both, in the State of Florida.
SIGNATURE .	Signature, typed or printed name of registered agent and	title if applicable (NOTE: 6	Registered Agent signature requ	uired when reinstating) DATE
O This same	 	Transfer and the transfer of the	FEE IS \$150.00	
Tax filing r	pration is eligible to satisfy its Intangible equirement and elects to do so.	After MAY 1, 2001) Fee will be \$550.0	Added to 1 des 1
,	ria on back)	Make Check Payable	· HETE . 그리 10 . 12 + 그 학자 . 25 HE + 전환	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
11. IITLE PR	OFFICERS AND DI		12.	
NAME	PRESIDENT BABUL AH	MEN	NAME	□ Change □ Addition (%) 1000033846311 (%) -03/07/0001004022 (%)
STREET ADDRESS	2250 Tyrone	Baval	STREET ADDRESS	-03/07/0001004022
CITY-ST-ZIP	2250 Tyrone 57. Peters wer	g. FA 337/0	CITY-ST-ZIP	****150.00 ****150.00 \\ \tag{Change} \text{Addition} \text{Addition} \\ \tag{Change} \text{Addition} \text{Addition} \\ \tag{Change} \text{Addition} \\ \
TITLE NAME	O	☐ Delete	TITLE. NAME	Change Addition O
STREET ADDRESS			STREET ADDRESS	
C!TY-ST-ZIP		<u></u>	CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	. Change Addition
NAME STREET ADDRESS			NAME STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME CIRCET ADOPTED		•	NAME STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	,		CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	
CITY-ST-ZIP TITLE			TITLE	Change Addition
NAME		□ Delete	NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP		<u> </u>	CITY-ST-ZIP	
indicated of the cor	on this report or supplemental report is tr	ue and accurate and that my ered to execute this report as	' sionature shall have ti	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 307, Florida Statutes; and that my name appears in Block 11 or Block 12 if
0101	Kahad Ma	/		7 10 000 717 201 71/10
SIGNAT	SIGNATURE AND TYPED OR PRIM	TED NAME OF SIGNING OFFICER OF	DIRECTOR	7-20-2000 727-381-2168 Date Date Daytime Phone *

2002

A & K BOOKKEEPING & TAX CONSULTANTS

Syed H.Sharfi,M.B.A,B.B.A
Accounting & Tax, Fla Atlantic University
Asif S. Sharfi CPA
Office & fax (561) 640-4010
Residence (561) 697-3086

Dated July 18th 2000.

This is to certify that Our Company mailed Annual Report for the followings Corporations.

- 1. RRB Enterprises Inc.
- 2. Raz Corporation Dry Cleaners

The above Corporation checks did not clear as of 05/15/2000, we called the Annual Report Section and was told "they are still working." But to our surprise, we received the letter that Annual Report has not been received by the Department. It is quite evident that it has been lost in the mail. We are therefore very sincerely requesting to accept our Annual Report with \$ 150.00 (Replacement Checks).

We will much appreciate your sympathetic consideration in this matter.

Thanking you,

Yours truly,

Sincerely,

(Syed H.Sharfi) Senior Partner