

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2002 8:00 am**  
**Secretary of State**

05-05-2002 90302 044 \*\*\*150.00

**DOCUMENT # P99000100858**

1. Entity Name  
**RACSO ENTERPRISES, INC.**

Principal Place of Business

**3383 NW 7TH STREET  
 STE 206  
 MIAMI FL 33125**

Mailing Address

**3383 NW 7TH STREET  
 STE 206  
 MIAMI FL 33125**

2. Principal Place of Business

**3383 N.W. 7th ST  
 Suite, Apt. #, etc.  
 210**

3. Mailing Address

**SAME AS ABOVE**

Suite, Apt. #, etc.

City & State

**MIAMI, FLORIDA**

City & State

Zip

**33125**

Country

Zip

Country

4. FEI Number

**65-0962146**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**ARTURO, REZA OSCAR  
 P O BOX 5350  
 3383 NW 7TH STREET STE 206  
 MIAMI FL 33125**

7. Name and Address of New Registered Agent

Name

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

**3383 NW 7th St SUITE 210**

City

**FL**

Zip Code  
**33125**

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 *Oscar Arturo Reza*

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) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 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 **PD** ☐ Delete  
 NAME **REZA, OSCAR ARTURO**  
 STREET ADDRESS **6637 DAHLIA DR.**  
 CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE **STD** ☐ Delete  
 NAME **GARCIA, MIGUEL A**  
 STREET ADDRESS **8851 N.W. 119TH STREET, APT 4402**  
 CITY-ST-ZIP **HIALEAH FL 33012**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME **REZA, OSCAR ARTURO**  
 STREET ADDRESS **2350 W 60th ST # 4**  
 CITY-ST-ZIP **HIALEAH FL 33016**

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

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

TITLE ☐ Change ☐ Addition  
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 CITY-ST-ZIP

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

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

SIGNATURE:

*Oscar Arturo Reza*

PRESIDENT

04/19/2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)