DOCUMENT # P99000103895 1. Entity Name R-& R DIGITAL IMAGING INC.						7/19/00-90006-013-\$150.00-\$150.00				
Principal Place of Business Mailing Address 5420 W CRENSHAW TAMPA FL 33634 TAMPA FL 33634						FILE 00 AUG -7 SECRETARY TAMANASSI	AM 10: 09	f makan arkan kura	1 1 1 1 1 1 1 1 1 1	
2. Principal Place of Business 6315 ANDERSON ROAD Suite, Apt. #, etc. 3. Mailing Address 6315 ANDERSON Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
	PA, FIORIDA JAMPA, HO			RIDA	. 4	4. FEI Number Applied For Not Applied For				
336:	34 Country USA	25p 33634	ISA		5. Certificate of Status D		\$8.75 Ad Fee Requir			
6. Name and Address of Current Registered Agent					7	/. Name and Address of	of New Hegistered	Agent		_
RIVERA, MICHAEL 5420 W CRENSHAW				Street Address (P.O. Bax Number is Not Acceptable)						オ▔
TAMPA FL 33634]
				CINTAMPA FL Zip Cod 634						
8. The above	e named entity submits this statement for t	the purpose of changing it	s register	ed office or	registered	agent, or both, in the St	ate of Florida.			
SIGNATURE	Signature, typed or printed name of registered agent and	d title of applicable. (NO	TE: Registers	d Agent signatu	re required who	n 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 After SEPTEMBER 13, 2000 Make Check Payable to De					oe \$750.0	10. Election Camp			00 May Be d to Fees	-
11.	OFFICERS AND D		12.			ADDITIONS/CHANGES			IS IN 11	[
NAME STREET ADDRESS CITY-ST-ZIP		Delete		1	111101 1313 TA	and Rivered ANDERSO AMPA H.	WRD. 33634		P Addition	7 (
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	Addition SP	
13. I hereby certify that the information supplied with this filing does not quality 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 697, 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. SIG										
J.W.171		TED HAME OF BIGHING OFFICER	OR DIRECT	OR C	-	Date		Daytime Phone #		

-



Tampa,Fl.
July 11,00

Florida Department of State Division of corporations Tallahassee, FL 32314

To whom it may concern:

Enclosed you will find a check in the amount of \$150.00 to cover UBR fee

We have not received a previous mailing of this report, for we would have

mailed it inmedetely to avoid paying the \$400.00 late fee.

Thank you in advance,

Michael Rivera, President R & R Digital Imaging Inc.