

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 03, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P99000111252**1. Entity Name  
R.I.I., INC.**Principal Place of Business**

2940 CARDINAL DR.

VERO BEACH  
32963

FL

**Mailing Address**

3103 W OCEAN BLVD

% WALTER WOODS  
STUART  
34994

FL

**2. Principal Place of Business**

310 SW OCEAN BLVD.

**3. Mailing Address**

310 SW OCEAN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
% WALTER WOODS

DO NOT WRITE IN THIS SPACE

**City & State**

STUART

FL

**City & State**

STUART

FL

**4. FEI Number****65-0989114**

Applied For

Not Applicable

**Zip**

34994

**Country****Zip**

34994

**Country****5. Certificate of Status Desired****\$8.75** Additional  
Fee Required**6. Name and Address of Current Registered Agent**WOODS WALTER G  
310 SW OCEAN BLVD.

STUART

34994

FL

US

**7. Name and Address of New Registered Agent**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**04/03/2001**

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, 2001 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 D ☐ Delete  
NAME GARRETT MITCHEL  
STREET ADDRESS 2940 CARDINAL DR.  
CITY-ST-ZIP VERO BEACH FL 32963TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE D ☒ Change ☐ Addition  
NAME GARRETT MITCHEL  
STREET ADDRESS 310 SW OCEAN BLVD  
CITY-ST-ZIP STUART FL 34994TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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:** Mitchel Garrett

D

04/03/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)