## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 21, 2004 08:00 AM Secretary of State DOCUMENT # S49386 Entity Name R-3 CORP. Principal Place of Business Mailing Address 5520 W FLAGLER ST. 5520 W FLAGLER ST. STE A STE A MIAMI, FL 33134 MIAMI, FL 33134 04142004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0277490 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROBERTO, MESA DO NOT WRITE 4565 SW 87TH AVE. MIAMI, FL 33165 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U00000123106 04/21/04-80057-007 8.75 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ..... DVSD TITLE MESA, MARTHA J. NAME U00000123106 04/21/04-80057-008 150.00 STREET ADDRESS 4565 SW 87TH AVENUE CITY-ST-ZIP MIAMI, FL DTD BTIE NAME MESA, ROBERTO STREET ADDRESS 4565 SW 8TH AVENUE CRY-ST-ZIP MIAMI, FL HILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-EP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 empoweres 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 attackment with

SIGNATURE: 1

STREET ADDRESS CITY-ST-ZIP TIRE NAME STREET ADDRESS

FILED