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Mar 16, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S98735 1. Corporation Name

R&RR	EAL ESTATE CO)RP.									
Principal Place	e of Business	M	ailing Address		_			- 11 1001111 11 11 11 11 11 11 11 11 11 11	IDI DINI DIDIR DI	ALI DADU DADA	I DIDII ARAN IDDI
18801 COLLINS AVE. LCE5 MIAMI BEACH FL 33160			9381 SW 32ND ST Miami Fl 33165 US				DO NOT WRITE IN THIS SPACE				
US								3. Date Incorporated or Qualifed			
2 Diameter	In a of Division	1 22	Mailing Address					12/06/1991 4. FEI Number			pplied For
2. Principal Place of Business			2a. Mailing Address					65-0302472		\vdash	lot Applicable
Suite, Apt #, etc.			Suite, Apt. #. etc.								Additional
22	#, 010.	27	27					Certifcate of Status Desired		-	Required
City & State	e		City & State					6. Election Campaign Financing		\$5.00	May Be
23		28	28					Trust Fund Contribution			to Fees
Zip	Coun	try	Zip Cour			intry		8. This corporation owes the curre	ent year Inta	ngible	
24	25	29	29 30					Personal Property Tax.		Yes	□No
	9. Name and Add	ress of Current Regis	stered Agent					10. Name and Address of New R	egistered A	gent	
505	DIOUEZ DOO4			ì	81	Nam	е				l l
RODRIGUEZ, ROSA					82	Stree	et Addre	ss (P.O. Box Number is Not Accepta	ble)		
18801 19995 COLLINS AVE											
MIAN	MI BEACH FL 33160	J			83						\
				1	84	City			FL	85 Zip	Code
11 Pursuant	to the provisions of Se	ctions 607 0502 and f	07 1508 Florida Stati	ites the at)OVE	-name	d corpo	ration submits this statement for the	numose of a	hanging it	s registered
office or o	egistered agent, or bo m familiar with, and ac	th in the State of Flori	da. Such change was	authorized	bν	the cor	poration	n's board of directors. Thereby accep	t the appoin	tment as r	egistered
SIGNATURE									DATE		
12.	Signature Typed or printed name of registered agent and title if applicable NOTE F OFFICERS AND DIRECTORS				equitered Agent signature required			ADDITIONS/CHANGES TO OFF		DIRECT	ORS IN 12
TITLE	DPT	OF TICENS AND DING	DELETE	1 III			T	7.5571.0110.011.1102.0 .0 .0.1		Change	
NAME	RODRIGUEZ, ROS	ΣΛ.		1 2 NA							
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TITLE			☐ DELETE	ı ı						спанде	1_1 Addition
NAME				6 2 NA		ADDDCC					
STREET ADDRESS				63 ST	KEET	ADDRES	13				

14. I hereby certify that the information supplied with this filling does not gualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: