## Page 15/2 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # V55768 1. Entity Name 00 SEP 12 PM 12: 05 R.J. MORALES & ASSOCIATES, INC. SEGENTARY OF STATE. TALLEJAVARITUE; FLORIDA Principal Place of Business Mailing Address 17880 S. DIXIE HWY MIAMI. FL 33157 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0349111 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RAFAEL BURGOS Street Address (P.O. Box Number is Not Acceptable) 17880 S. DIXIE HWY MIAMI, FL 33157 Zio Code FL 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 igent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change P/D NAME NAME RAFAEL BURGOS STREET ADDRESS 700003400207-STREET ADORESS 17880 S. DIXIE HWY CITY-ST-ZIP -09/21/00--01024--008 CITY-ST-ZIP MIAMI, FL 33157 ####₩500 Addition TITLE \*\*\*\*500.00 ☐ Defete TITLE NAME NAME STREET ADDRESS 700003400207---09/21/00--01024--009 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIŢĮ,E \*\*\*\*500<u>.00</u> ☐ Detete TITLE NAME\* NAME STRE' ADDRESS STREET ADDRESS CITY T-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS 700003400207--4 CITY-ST-ZIP CITY-ST-ZIP -09/21/00--01024--010 TITLE Delete TITLE \*\*\*\*\*15.00 行动流走15 山从ddition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7iP 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: / MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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## R.J. MORALES & ASSOCIATES, INC. DOC.# V55768

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION. DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS. THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

RAFAEL BURGOS

**PRESIDENT**