## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

200

## FILED May 08, 2002 8:00 am Secretary of State 05-08-2002 90140 020 \*\*\*150.00

305-743-9626

1. Entity Name	# 1 7 80000 36	
RABITO	ENTERPLISES,	INC

SIGNATURE:

7						
DO NOT WRI	TE IN THIS S	PACI	<b>=</b>			
2. Principal Place of Business 1000 WEST 75TH ST. 00	3. Mailing Address	- 54				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	EST 15	TH STOCEAN		ODAGE	
				DO NOT WRITE IN THIS	SPACE	
City & State  MALATHON	City & State	3050	) 4	4. FEI Number 0835331	Applied For	
Zip Country				5. Certificate of Status Desired \$8.75 Additional		
2 >03 7		<del></del>		Name and Address of Current Registere	Fee Required .	
			Name WILL		C C	
DO NOT	WRITE		Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE			1000	WEST 75TH ST.	UCEAN	
		-	City	CATHON	£	
				FL	Zip Code 33050	
8. The above named entity submits this statem	ent for the purpose of changing its	s registered	office or registered a	agent, or both, in the State of Florida.	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE				•		
Signature, typed or printed name of registered	agent and title if applicable. (NOT	TE: Registered Ag	ent signature required when	en reinstating) DATE	<del></del>	
9. This corporation is eligible to satisfy its Intar	ngible January 1 - M			10 Floation Compaign Financias		
Tax filing requirement and elects to do so. (See criteria on back)  After May 1, Fee is \$550.00 Amended UBR is \$61.25		61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
	Make Check Payat AND DIRECTORS	ble to Depa	rtment of State			
TITLE	ILLIAM T. JR	TITLE		, , , , , , , , , , , , , , , , , , ,		
NAME STREET ADDRESS 1000 WEST S	75- TAL STREET ALM	NAME				
CITY-ST-ZIP MARATHON - A	TO TH STREET OCE 2-3305D	STREET A City-St-				
TITLE		TITLE				
NAME STREET ADDRESS		NAME	-			
CITY-SI-ZIP		STREET A	į.	•	,	
TITLE		TITLE				
NAME STREET ADDRESS		NAME				
CITY-ST-ZIP		STREET AC		DO NOT WRI	ΓΕ	
TITLE	<del></del>	TITLE				
NAME STREET ADDRESS	•	NAME		IN THIS SPAC	,E	
CITY-ST-ZIP		STREET AD				
TITLE		TITLE		,		
NAME STREET ADDRESS		NAME				
CITY-ST-ZIP		STREET AD CITY-ST-Z	1		,	
TITLE		TITLE		Α		
NAME .		NAME				
DITY-ST-ZIP		STREET ADI	.		j	
13. I hereby certify that the information supplied indicated on this report or supplemental report of the corporation or the receiver or trustee of attachment with an address with all other like	with this filing does not qualify for int is true and accurate and that me ampowered to execute this reperference empowered.			119.07(3)(i), Florida Statutes. I further certifulgal effect as if made under oath; that I and orida Statutes; and that my name appears	y that the information n an officer or director in Block 11 or on an	

attachneret

P98000036443

RABITO ENTERPRISES, INC. 1000 WEST 75TH STREET OCEAN MARATHON, FL 33050

Request taken by: Isellers 03-25-2002

The forms you recently requested from this office are:

(1) 201. COR Profit A/R

Should you have any questions or need any further information, please contact us at the address below:

Division of Corporations · P.O. BOX 6327 · Tallahassee FL 32314

Did not seewe for 2002, so this is one year sent is. If there is a problem care 305 743-9424

2001 UNIFORM BUSINESS REPORT (UBR)									
DOCU	MENT # <b>P98000</b> 0	36443		J (530)245-67	<i>5</i> /.				
1. Entity Nam RABITO	ENTERPRISES, INC.		$\cap$	(350)245-69 (ATTACHM	ENT				
Principal Plac 1000 WEST 751 MARATHON FL	TH STREET OCEAN	Mailing Address 1000 WEST 75TH STREET OF MARATHON FL 33050	CEAN		DIE BUIK STEIN BIESE INK IEBI				
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE				
City & Stat	е	City & State		4. FEI Number 65-0835331	Applied For Not Applicable				
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required				
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registered	Agent				
1000	LIAM, RABITO ) WEST 75TH ST. OCEAN IATHON FL 33050		Street Addr	ess (P.O. Box Number is Not Acceptable)					
			City	FL	Zip Code				
8. The above	named entity submits this statement to	the surpose of changing its re	egiste <b>la</b> d office or reg	gistered agent, or both, in the State of Florida.					
SIGNATURE .	Signature, typed or printed name of registered agent a	ind life if applicable. (NO E:	Registered Agent signature re	DATE					
Tax filling	oration is eligible to satisfy its intangible requirement and elects to do so. ria on back)	FILE NOW N After MAY 1, 200 Make Check Payable	FEE IS \$150.00 Fee will be \$550. e to Department of		\$5.00 May Be Added to Fees				
11.	OFFICERS AND	<del></del>	12.	ADDITIONS/CHANGES TO OFFICERS AND					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RABITO, WILNAM T JR 1000 WEST 73TH STREET OCEA MARATHON FL\33050	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· I pelie	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- "3	Change Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V	Delete	TITLE NAME. STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CHY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		Change Addition				
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP		Change Addition				

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 a fault 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: \_

NICLIAN T. RABID (305 7) 43-0576