2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # H84425** Entity Name 04-26-2004 91030 034 ***150.00 RJM CONTRACTORS, INC. Mailing Address Principal Place of Business 3108 29TH AVENUE EAST 3108 29TH AVENUE EAST BRADENTON, FL 34208 BRADENTON, FL 34208 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04212004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 59-2592371 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PARCELS, RICHARD A. Street Address (P.O. Box Number is Not Acceptable) 3108 29TH AVENUE EAST BRADENTON, FL 33508 City 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. I am familiar with, and accept the obligations of registered agent/ SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change ☐ Addition PARCELS, RICHARD A. NAME NAME STREET ADDRESS 3108 29TH AVENUE EAST STREET ADDRESS CITY-ST-ZIP BRADENTON, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition PARCELS, JOHN D. NAME NAME 3108 29TH AVENUE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP BRADENTON, FL 34208 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME -.PARCELS, EVELYN B. --NAME -3108 29TH AVENUE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34208 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition PARCELS, JOHN M. NAME NAME STREET ADDRESS 3108 29TH AVENUE EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL ☐ Delete TITLE TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

FILED

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.