


**2005 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2005 08:00 AM
Secretary of State

DOCUMENT # 407884 1. Entity Name RAY'S SHOWCASE, INC.	
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Principal Place of Business 2340 ST 580 STE M CLEARWATER, FL 33763 US	Mailing Address 2340 SR 580 STE M CLEARWATER, FL 33763 US
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03052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1427176	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GRIFFIN, DAVID W. 565 DUNCAN SOUTH CLEARWATER, FL 33756
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**DO NOT WRITE
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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LETTRE, STEVEN R. 2508 SPINAKER COURT PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LETTRE, JOSEPH A. 1727 87TH TERRACE ST. PETERSBURG, FL 0,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC LETTRE, RAYMOND A 9265 ASHLEY DRIVE WEEKIE WACHEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LETTRE, RAYMOND A. 9265 ASHLEY DRIVE WEEKIE WACHEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000362591
05/05/05-80125-005 150.00

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IN THIS SPACE**

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.

SIGNATURE: STEVEN R LETTRE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/30/05 Daytime Phone #