


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F01725

1. Entity Name
RAISSYJ, INC.



Principal Place of Business
7201 NW 36TH ST
MIAMI, FL 33166 US

Mailing Address
C/O JOSE RODRIGUEZ
17400 S.W. 63 MANOR
FT. LAUDERDALE, FL 33331



DO NOT WRITE IN THIS SPACE

03302004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2029906

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

RODRIGUEZ, JOSE
17400 S.W. 63RD MANOR
FT. LAUDERDALE, FL 33331

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6. 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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-appointing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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 RODRIGUEZ, JOSE 17400 SW 63 MANOR FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS RODRIGUEZ, JUANITA 17400 SW 63 MANOR FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V RODRIGUEZ, RAYMOND J. 14694 S. W. 45TH STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T RODRIGUEZ, JOSE MANUEL 17400 SW 63 MANOR SW RANCHES, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Juanita Rodriguez* **Juanita Rodriguez** 4/5/04 (305) 592-0058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Cayman Phone #