

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 14, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # F03000004650**

1. Entity Name

RJF INTERNATIONAL CORPORATION



Principal Place of Business

3875 EMBASSY PARKWAY  
FAIRLAWN, OH 44333

Mailing Address

3875 EMBASSY PARKWAY  
FAIRLAWN, OH 44333



05242004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
34-1592606

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	POD
NAME	BAECHLE, JOHN
STREET ADDRESS	3875 EMBASSY PARKWAY
CITY - ST - ZIP	FAIRLAWN, OH 44333
TITLE	V
NAME	HAUEISEN, ANTHONY J
STREET ADDRESS	3875 EMBASSY PARKWAY
CITY - ST - ZIP	FAIRLAWN, OH 44333
TITLE	STD
NAME	HOOD, HAVEN J
STREET ADDRESS	3875 EMBASSY PARKWAY
CITY - ST - ZIP	FAIRLAWN, OH 44333
TITLE	D
NAME	COLLINS, WALTER
STREET ADDRESS	3875 EMBASSY PARKWAY
CITY - ST - ZIP	FAIRLAWN, OH 44333
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000162536  
06/14/04-80002-017 550.00

**DO NOT WRITE  
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)(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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/04

Date

330 668-7648

Daytime Phone #