## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F83217

Entity Name: R & J AD AGENCY, INC.

FILED May 01, 2007 Secretary of State

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Current P	rincipal Plac	e of Business:	New Prin	New Principal Place of Business:		
	NANA RIVER EACH, FL 32			3850 S BANANA RIVER BLVD COCOA BEACH, FL 32931		
Current N	lailing Addre	ss:	New Mail	New Mailing Address:		
3850 S BANANA RIVER BL COCOA BEACH, FL 32931				3850 S BANANA RIVER BLVD COCOA BEACH, FL 32931		
FEI Number: 59-2409584 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired (X)			
Name and	d Address of	Current Registered Agent:	Name and	d Address of	New Registered Agent:	
72 COUN	NBAUM, MALO TRY CLUB LN EACH, FL 32	I				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing	its registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
Election Car		03(2)(b), F.S., the corporation did no g Trust Fund Contribution(). CTORS:			S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	STD ( DIMENNA, RO 4151 N ATLAN COCOA BEAC	TIC AVE	Title: Name: Address: City-St-Zip:	DIMENNA, R 4151 N. ATL		
Title: Name: Address: City-St-Zip:	PD ( MORIARTY, E 4151 N ATLAN COCOA BEAC	TIC AVE	Title: Name: Address: City-St-Zip:	MORIARTY, 4151 N. ATL		
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	KIRSCHENB. 4151 N. ATL	(X) Change () Addition AUM, MALCOLM R ANTIC AVE CH, FL 32931	
Title: Name: Address: City-St-Zip:	D ( MANLEY, T. R 4151 N ATLAN COCOA BEAC		Title: Name: Address: City-St-Zip:	MANLEY, T. 4151 N. ATL		
Title: Name: Address: City-St-Zip:	D ( MICHAEL, CO 4151 N. ATLAN COCOA BEAC	ITIC AVE.	Title: Name: Address: City-St-Zip:	COLEMAN, N 4151 N. ATL		
Title: Name: Address: City-St-Zip:	S ( YOUNGS, JAC 4151 N ATLAN COCOA BEAC	TIC AVE	Title: Name: Address: City-St-Zip:	YOUNGS, JA 4151 N. ATLA	(X) Change ( ) Addition CQUELINE G ANTIC AVE CH, FL 32931	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD L. MORIARTY D 05/01/2007