



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2007 08:00 AM
Secretary of State

DOCUMENT # J82475	
1. Entity Name R. S. J. INC.	

Principal Place of Business 5413 HELENE CIR. BOYTON BEACH, FL 33437	Mailing Address 5413 HELENE CIR. BOYTON BEACH, FL 33437
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DO NOT WRITE IN THIS SPACE

	
01202007	No Chg-P
CR2E034 (11/05)	
4. FEI Number 65-0005734	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 GUSTAFSON, ROBERT 5413 HELENE CIRCLE BOYNTON BEACH, FL 33437	
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUSTAFSON, ROBERT 5413 HELENE CIR. BOYNTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GUSTAFSON, SHEILA 5413 HELENE CIR. BOYNTON BEACH, FL
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01/25/07-80030-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Sheila Gustafson</u> SHEILA GUSTAFSON	JANUARY 20, 2007 561-742-8921
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>