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## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Jul 08, 2004 8:00 am Secretary of State 07-08-2004 90188 025 \*\*\*150.00 **DOCUMENT # P00000038642** 1. Entity Name ROBERT J. HOBSON, INC. **ժ**አር ነ <del>የ</del>ሀድ ድ Principal Place of Business Mailing Address 549 N.E. 165 ST 549 N.E. 165 ST MIAMI, FL 33162 **SUITE 325** MIAMI, FL 33162 2. Principal Place of Business 3. Mailing Address 07012004 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For 65-0774875 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOBSON, ROBERT Street Address (P.O. Box Number is Not Acceptable) 549 N.E. 165 ST MIAMI, FL 33162 City Zip Code FL for the ourpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity ubmits the the obligations of reg ame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5:00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. TITLE ☐ Delete TITLE Change ☐ Addition HOBSON, ROBERT NAME NAME STREET ADDRESS **549 NE 165 STREET** STREET ADDRESS CITY-ST-7IP MIAMI, FL 33162 CITY-ST-ZIP ☐ Delete Change TITLE TITLE ■ Addition NAME HOBSON, ROSA E STREET ADDRESS **549 NE 165 STREET** STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33162 CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TIME ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

FILED

Daytime Phone #

Attachment # 120000003 **b**43
ROBERT J HOBSON, INC

ROBERT J HOBSON, IN 549 NE 165 STREET MIAMI, FL 33162

July 1, 2004

Division of Corporations Annual Report Section P.O. Box 6327 Tallahassee, FL 32314

RE: ROBERT J. HOBSON, INC

#65-0774875

Dear Sir or Madam:

Please be advised that the above mentioned uniform business report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived, and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00.

Please advise.

Thank you for prompt attention to the above mentioned matter.

Sincerel

Robert Hobson V.President

RH/rr