2002 UNIFORM BUSINESS REPORT (UBR)

Feb 25, 2002 8:00 am Secretary of State P00000047612 DOCUMENT # 1. Entity Name RAYJAN GROUP, INC. 02-25-2002 90577 020 ***150.00 Principal Place of Business Mailing Address 185 TWELVE OAKS LANE 185 TWELVE OAKS LANE PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3648550 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DANIELS, NICHOLAS M ESQ. Street Address (P.O. Box Number is Not Acceptable) SUNTRUST INTERNATIONAL CENTER ONE S.E. 3RD AVENUE - SUITE 2400 MIAMI FL 33131 City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE TITLE ☐ Delete Addition ROSS, RAYMOND A JR. NAME NAME 185 TWELVE OAKS LANE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition ROSS, JANICE C NAME STREET ADDRESS 185 TWELVE OAKS LANE STREET ADDRESS CITY-ST-ZIP Ponte vedra beach fl 32082 CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered

SIGNATURE/

Raymond A. Ross, Jr. Pres/Director 1/23/02

CR2E034 (9/01)

FILED

326582

RAY M. SHAW

CERTIFIED PUBLIC ACCOUNTANT
7600 RED ROAD, SUITE 206
SOUTH MIAMI, FLORIDA 33143

(305) 665-4926 FAX: (305) 663-6641

February 15, 2002

Uniform Business Report Division of Corporations P. O. Box 1500 Tallahassee, Florida 32302-1500

Gentlemen/Mesdames:

Enclosed with this letter are 2002 Uniform Business Reports and filing fees for the below named corporations:

RayJan Group, Inc, Document #P00000047612 with check for \$150.00 payable to the Department of State

Ross/Carrier Group, Inc., Document #P00000111322, with check for \$150.00 payable to the Department of State

Ross/Crawford Group, Inc., Document #P00000111317, with check for \$150.00 payable to the Department of State

JanRoss Properties, Inc., Document #P92000000082, with check for \$150.00 payable to the Department of State

Would you please acknowledge receipt of these uniform business reports by signing in the space provided on the enclosed copy of this letter. After signing, send the acknowledgement copy to our office in the pre-addressed stamped envelope enclosed.

Thank you for your attention to our request.

Very truly yours,

Ray M. Shaw

RMS:sw Enclosures

ATTACHMENT DOCH: POODOOD 47612.

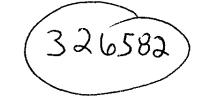
RAY M. SHAW

CERTIFIED PUBLIC ACCOUNTANT 7600 RED ROAD, SUITE 206 SOUTH MIAMI, FLORIDA 33143

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Ray M. Shaw

RMS:sw Enclosures

RECEIPT OF THE ABOVE NOTED UNIFORM BUSINESS REPORTS AND CHECKS IS HEREBY ACKNOWLEDGEMENT:

SIGNED	
For the Department of State	
_	
DATE	_

326582

RAY M. SHAW
CERTIFIED PUBLIC ACCOUNTANT
7800 RED ROAD, SUITE 208
SOUTH MIAMI, FLORIDA 33143

Ray M. Shaw, C. P. A. 7600 Red Road, Suite 206 Miami, Florida 33143

