

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State
 03-11-2002 90079 048 ***150.00

0060602 AV

DOCUMENT # P01000041150

1. Entity Name
RAJ BUILDING CONCEPTS, INC.

Principal Place of Business
 6850 CEDAR RIDGE CIR.
 MILTON FL 32570

Mailing Address
 6850 CEDAR RIDGE CIR.
 MILTON FL 32570



2. Principal Place of Business
 7507 SEARS Blvd
 Suite, Apt. #, etc.

3. Mailing Address
 Same
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 Pensacola Fla
Zip
 32514
Country
 Ecuadoria

City & State
 #
Zip
Country

4. FEI Number
 59-3723760

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ISAACSON, ALAN
 6850 CEDAR RIDGE CIR.
 MILTON FL 32570

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Aubrey A. Johnson
 (NOTE: Registered Agent signature required when reinstating)

02-26-02
 DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME ROGERS, RALPH
STREET ADDRESS 5998 CLARK ST.
CITY-ST-ZIP MILTON FL 32570

TITLE D ☐ Delete
NAME ISAACSON, ALAN
STREET ADDRESS 6850 CEDAR RIDGE CIR.
CITY-ST-ZIP MILTON FL 32570

TITLE D ☐ Delete
NAME JOHNSON, AUBREY
STREET ADDRESS 8611 VANCE AVE.
CITY-ST-ZIP PENSACOLA FL 32535

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
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: Aubrey A. Johnson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-26-02
 Date

850-494-2856
 Daytime Phone #

CR2E034 (9/01)