

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Amended

DOCUMENT # **PO1000089992**

1. Entity Name

RJ MASONRY & CONCRETE, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1766 7th AVE S.W.

Suite, Apt. #, etc.

3. Mailing Address

1766 7th AVE S.W.

Suite, Apt. #, etc.

City & State

Vero Beach FL

City & State

Vero Beach FL

4. FEI Number

65-1140790

Zip

32962

Country

Zip

32962

Country

5. Certificate of Status Desired

2003 JUN 11 AM 10:11
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

7. Name and Address of Current Registered Agent

Name **Robert Julian**

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

1766 7th Ave S.W.

City **Vero Beach**

FL

Zip Code **32962**

**DO NOT WRITE
IN THIS SPACE**

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 **Robert Julian**

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

(NOTE: Registered Agent signature required when registering)

June 1, 2003
DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **Robert Julian**
STREET ADDRESS **1766 7th AVE S.W.**
CITY-ST-ZIP **Vero Beach FL 32962**

TITLE **VD**
NAME **Robert Julian**
STREET ADDRESS **1766 7th AVE S.W.**
CITY-ST-ZIP **Vero Beach FL 32962**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
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STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400020036934
06/11/03--01050--0161 **35.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400020036934
06/11/03--01050--0151 **8.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400020036934
06/11/03--01050--0181 **8.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400020036934
06/11/03--01050--0171 **35.00

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Robert Julian P.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 1, 2003 **772-569-3004**
Date Daytime Phone #

CR2E034B (12/02)