


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000002708 1. Entity Name R AND JAY PROPERTIES INC.	
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Principal Place of Business 13701 80TH AVENUE N SEMINOLE, FL 33776	Mailing Address 13701 80TH AVENUE N SEMINOLE, FL 33776
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02232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0550497	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 PICARIELLO, JOAN 13701 80TH AVENUE N SEMINOLE, FL 33776
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**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 _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U000000087418
03/15/04-80010-013 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BOUSQUET, ROBERT 13701 80TH AVENUE N SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PICARIELLO, ROBERT 13701 80TH AVENUE N SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD KREIMENDAHL, JUDITH 13701 80TH AVENUE N SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PICARIELLO, JOAN 13701 80TH AVENUE N SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Joan Picariello* 3/11/04 727-544-4146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #