2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2004 8:00 am
Secretary of State
05-10-2004 90481 046 ***150.00

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DOCUMENT # P02000003717

1. Entity Name
R D ADJUSTING, INC.

Robert R. Drago
PO Box 740864
Boynton Beach, FL 33474-0864

Principal Place of Business
~~8496 LOGIA CIR.~~
~~BOYNTON BCH, FL 33437~~
4320 PEAR TREE CIRCLE ← SAME
BOYNTON BEACH FL 33436

Mailing Address
8496 LOGIA CIR.
BOYNTON BCH, FL 33437

DO NOT WRITE IN THIS SPACE

02242004 No Chg-P CR2E034 (10/03)

4. FEI Number
01-0587123

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DRAGO, ROBERT
~~8496 LOGIA CIR.~~ 4320 PEAR TREE CIRCLE
BOYNTON BCH, FL ~~33437~~ 33436

Robert R. Drago
PO Box 740864
Boynton Beach, FL 33474-0864

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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 R Drago JUNE 3-04
Signature, typed or printed name of Registered Agent and title if agent is an officer (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

10.

TITLE	D
NAME	DRAGO, ROBERT
STREET ADDRESS	8496 LOGIA CIR.
CITY-ST-ZIP	BOYNTON BCH, FL 33437

Robert R. Drago
PO Box 740864
Boynton Beach, FL 33474-0864

TITLE	
NAME	DRAGO, Robert
STREET ADDRESS	4320 PEAR TREE CIRCLE
CITY-ST-ZIP	BOYNTON BCH FL 33436
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 an address, with all other like empowered.

SIGNATURE: Robert R Drago Robert R. DRAGO MAY 7-04 954-484-6880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #