FILED Feb 21, 2007 8:00 am Secretary of State 02-06-2007 90013 018 ***150.00

DOCUMENT # P02000042248 1. Entity Name						
R.J. HIII & Associates, Inc. BO NOT WRITE IN THIS SPACE					66002413	
2. Principal Place of I		3. Mailing Address		487411314447444444	•	
12302 Pleasant Green Suite, Apt. #, etc.	Way	3146 NW 68th Stree Suite, Apt. #, etc			DO NOT WRITE IN THIS	S SPACE
, ,		Suite No.1 City & State	<u>. </u>		4. FEI Number	
City & State Boynton Beach, FL		Fort Lauderdale, Flo	Fort Lauderdale, Florida		4. FEI Number 01-0679655	Applied For Not Applicable
Zip 33437	Country USA	Zip 33309-1206	Co USA	ountry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
				7. Nan	me and Address of Current Regis	
	IA LIAT I	Mitte		Name Ray Jerome I		
DO NOT WRITE IN THIS SPACE				Street Address (P.O. Box Number is Not Acceptable) 12302 Pleasant Green Way		ptable)
				City		Zip Code
				Boynton Beac	ch FL	33437
8. The above named State of Florida. I	entity submits t⊓is am familiar with ∤ai	s statement for the purpo nd accept the obligations	se of ch s of regi	nanging its regis etered agent.	istered office or registered agent, or	both, in the
SIGNATUREY	Ruy. de	some al	U	Ray Jerome H		1/12/2007
Signatu	re, types or princit nam May 1 Fee is \$1.	ne of registered agent and title if	applicable		stered Agent signature required when reinstatin	
After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Fiorida Department of State					9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.		AND DIRECTORS	11.	n <i>E</i>		
NAME	Hill, Ray Jerome	•	NA	ME		
STREET ADDRESS _CITY-ST-ZIP	12302 Pleasant C Boynton Beach, F	Florida 33437		REET ADDRESS TY-ST-ZIP	9	
TITLE NAME STREET ADDRESS	Board Advisor/Ex Clifton H. Rodriqu 3148 NW 68th St	x-officio member uez, MPA, CPA, CIA treet, Suite No.1	TTT NA ST	TLE AME TREET ADDRESS	s	
CITY-ST-ZIP	Fort Lauderdale, Corporate Treasu	Florida 33309-1206		TY-ST-ZIP TLE		
NAME STREET ADDRESS	Ray Jerome Hill 12302 Pleasant (Boynton Beach,	Green Way	NA ST	ILE SME IREET ADDRESS TV-91-ZIP	s BONGTW	/Pinis
TITLE	Boymon Deson,	TOTICA 33-437	m	ne	I Nates:	
NAME STREET ADDRESS CITY-ST-ZIP			ST	AME IREET ADDRES: TY-6T-ZIP		~ U
TITLE NAME STREET ADDRESS			NA ST	TLE AME TREET ADDRES!	5	
CITY-ST-ZIP TITLE	 		TI	TY-ST-ZIP TLE		
NAME STREET ADDRESS			5 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	AME TREET ADDRES!		
CITY-ST-ZIP			cr	TY-ST-ZIP		
12. I hereby certify that the information supplied with this filling 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.						
1/1 1 11						
SIGNATURE:	MURE AND TYPED	OR PRINTED NAME OF S	erome Hi SIGNING			54)675-2967 lytime Phone #

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