

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90007 009 ***550.00

DOCUMENT # P02000051841 1. Entity Name R & R BUILDING & COATING SYSTEMS, INC.			
Principal Place of Business 2505 S. PENINSULA DR. DAYTONA BEACH, FL 32118		Mailing Address 2505 S. PENINSULA DR. DAYTONA BEACH, FL 32118	
2. Principal Place of Business 500 Carswell Ave		3. Mailing Address 500 Carswell Ave.	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Holly Hill - FL		City & State Holly Hill - FL	
Zip 32117		Zip 32117	
Country Volusia		Country Volusia	
6. Name and Address of Current Registered Agent SAMUELS, NEIL A 500 CARSWELL AVE. HOLLY HILL, FL 32117		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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Neil A. Samuels</i></u> Neil A. Samuels <u>7/20/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST <input type="checkbox"/> Delete SAMUELS, NEIL A 500 CARSWELL AVENUE HOLLY HILL, FL 32117	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Wilfred Evans 1117 San Jose Blvd. Holly Hill, FL 32117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Jeremy Samuels 954 Country Club Ave Daytona Beach, FL 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Glenda R. Leighliter 1301 Imperial DR. Daytona Beach, FL 32117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u><i>Neil A. Samuels</i></u> Neil A. Samuels <u>7/20/04</u> <u>386-253-7627</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

44049643



07202004 Chg-P CR2E034 (10/03)

4. FEI Number
05-0521701 Applied For
Not Applicable

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