

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90010 040 ***150.00

DOCUMENT # P02000056982

1. Entity Name
R & J MARKETING OF PINELLAS, INC.



Principal Place of Business
**435 81ST AVE
ST PETE BEACH, FL 33706**

Mailing Address
**435 81 AVE
ST PETE BEACH, FL 33706**

54032261



02262004 Chg-P CR2E034 (10/03)

2. Principal Place of Business
13602 Sigler Street
Suite, Apt. #, etc.

3. Mailing Address
13602 Sigler Street
Suite, Apt. #, etc.

City & State
Riverview

City & State
Riverview

4. FEI Number
45-0478516

Applied For
Not Applicable

Zip
33569 Country
U.S.

Zip
33569 Country
U.S.

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JACKSON, GEORGE R
435 81 AVE
ST PETE BEACH, FL 33706**

Name
Street Address (P.O. Box Number is Not Acceptable)
13602 Sigler Street

City
Riverview State
FL Zip Code
33569

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 _____ (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. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JACKSON, GEORGE R
435 81 AVE
ST PETE BEACH, FL 33706** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**13602 Sigler Street
Riverview, FL 33569** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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: *George R Jackson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/06/04
Date Daytime Phone #