

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-12-2004 90028 046 \*\*\*300.00

FILED P02000092002

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 JUL 29 AM 8:00

DOCUMENT # **P02000092002**

1. Entity Name

**R GARDNER ENTERPRISES INC**



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**4511 NW 27 ST**

3. Mailing Address

**SAME**

**REINSTATEMENT**

**54061755**

**03-04**

DO NOT WRITE IN THIS SPACE

**MRS**

Suite, Apt. #, etc.

**40 CAMPBELL**

Suite, Apt. #, etc.

City & State

**LAUDERHILL FL**

City & State

4. FEI Number

**33-1019316**

Applied For

Not Applicable

Zip

**33313**

Country

**BROW**

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

**ROMAC GARDNER**

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

**40 CAMPBELL**

**4511 NW 27 ST**

City

**LAUDERHILL**

FL

Zip Code

**33313**

**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)

**7/27/04**

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

☐

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PRESIDENT**  
NAME **GARDNER, ROMAC**  
STREET ADDRESS **4511 NW 27 ST**  
CITY-ST-ZIP **LAUDERHILL FL 33313**

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

**Romac Gardner**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/7/04 754-264-4924**

Date

Daytime Phone #

CR2E034B (12/02)

R GARDNER ENTERPRISES INC  
C/O CAMPBELL  
4511 NW 27 STREET  
LAUDERHILL, FL 33313  
P02000092002

FL DEPARTMENT OF STATE  
ANNUAL REPORT SECTION  
P O BOX 6850  
TALLAHASSEE, FL 32314

JULY 7, 2004


PLEASE BE ADVISED THAT I HAVE MOVED SEVERAL TIMES AND DUE TO PERSONAL  
FAMILY PROBLEMS, HAVE BEEN UNABLE TO DEPEND ON GETTING MY MAIL.

I HAVE ENCLOSED \$300 FOR 2003 AND 2004 AND REQUEST THAT MY CORPORATION BE  
REACTIVATED.

I WOULD APPRECIATE ANY CONSIDERATION THAT YOU CAN GIVE ME.

THANK YOU.

VERY TRULY YOURS,

  
ROMAC GARDNER  
PRESIDENT

Attachment

Do not detach

54061755-2/2