


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

09-13-2004 90005 020 ***150.00

DOCUMENT # P02000092987 1. Entity Name R & C ENTERPRIZE INC.					
Principal Place of Business 2918 SE. 8TH. PL. CAPE CORAL, FL 33904			Mailing Address 2918 SE. 8TH. PL. CAPE CORAL, FL 33904		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address P.O. Box 151029 Suite, Apt. #, etc.		
City & State CAPE CORAL, FL.			4. FEI Number 22-3867152		
Zip 33915			Country U.S.A		
6. Name and Address of Current Registered Agent CEDENO, CINDY 2918 SE. 8TH. PL. CAPE CORAL, FL 33904			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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>Cindy Cedeno</u> 9-8-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</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	P CEDENO, CINDY 2918 S.E. 8TH PL CAPE CORAL, FL 33904		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	
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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: <u>Cindy Cedeno</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			9-8-04 239 2294548 <small>Date Daytime Phone #</small>		

34072782



09092004 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

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

FL Zip Code

9-8-04

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	CEDENO, CINDY	
STREET ADDRESS	2918 S.E. 8TH PL	
CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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STREET ADDRESS		
CITY-ST-ZIP		

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SIGNATURE: Cindy Cedeno
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-04 239 2294548
Date Daytime Phone #

Attachment

54072782
002000092987

September 8, 2004

To Whom It May Concern:

IM WRITING TO INFORM YOU THAT WE HAVE NOT RECEIVED OUR
DIVISION OF CORPERATION PAPERS SO THAT WE COULD FILE. WE HAVE
BEEN HAVING PROBLEMS WITH OUR MALMAN ALSO I SPOKE TO THE
POSTMASTER ABOUT IT WE HAVE BEEN GETTING OUR MAIL MAILED TO
DIFFERENT ADDRESSES OUR ADDRESS IS 2918 SE 8TH PL, BUT OUR
MAILMAN HAS BEEN DELIVERING TO 2918 SE 8TH ST OR SE 8TH TER.
PLEASE MAKE A NOTE OF OUR NEW MAILING ADDRESS THAT IS PO BOX 151029,
CAPE CORAL, FL, 33915 .IF YOU HAVE ANY QUESTIONS PLEASE CALL MY HUSBAND
RAUL @ 239-2294548 AND HE WILL BE HAPPY TO ANSWER ANY QUESTION. OUR EIN #
223867152 , THAT'S R&C ENTERPRIZE INC.. ENCLOSED IS A CHECK FOR \$150.00

THANK YOU ,

Cindy Cedeno
CINDY CEDENO