


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000127008	
1. Entity Name RECU INCORPORATED	

Principal Place of Business FESTIVAL MARKETPLACE 2900 W SAMPLE RD (MS031) POMPANO BEACH, FL 33073	Mailing Address FESTIVAL MARKETPLACE 2900 W SAMPLE RD (MS031) POMPANO BEACH, FL 33073
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07192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4514284	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

REDAN, LES P
C/O BULK IN BINS
2900 W SAMPLE RD MS031
POMPANO BEACH, FL 33073

**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) **DATE** _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

1. Name REDAN, LESLIE 2. Address 9070 KIMBERLY BLVD BOCA RATON, FL 33434	3. Title P
1. Name CUSSON, ROBERT 2. Address 989 SOUTHEAST 6TH TERRACE POMPANO BEACH, FL 33060	3. Title V
1. Name 2. Address 3. Title	
1. Name 2. Address 3. Title	
1. Name 2. Address 3. Title	
1. Name 2. Address 3. Title	

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07/23/04-80006-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Les Redan Leslie Redan 7/20/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #