

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 09, 2004 8:00 am**  
**Secretary of State**

08-09-2004 90004 032 \*\*\*150.00

**DOCUMENT # P02000134542**

1. Entity Name  
RIC RAQ HOME IMPROVEMENTS, INC.



Principal Place of Business  
4010 W. LEMON ST.  
TAMPA, FL 33609

Mailing Address  
4010 W. LEMON ST.  
TAMPA, FL 33609

**54067469**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07282004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

14-1862757

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TESTA, PHILIP J SR  
4726-B N. LOIS AVE.  
TAMPA, FL FL

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME MONGIOVI, RICHARD JR  
STREET ADDRESS 4010 W. LEMON ST.  
CITY-ST-ZIP TAMPA, FL 33609

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
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CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
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☐ Delete

TITLE  
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CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment  
Doc. # 0020001345242  
54067469

**PJT**

**P. J. TESTA**  
**ACCOUNTANT**  
P. O. BOX 4562  
TAMPA, FLORIDA 33677  
ESTABLISHED 1974

813-877-9615

FAX 813-877-3257

1-800-293-7085

JULY 20<sup>TH</sup> 2004

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
P O BOX 6198  
TALLAHASSEE, FLORIDA 32314-6198

DEAR SIR:

PLEASE BE ADVISED THAT THE ATTACHED CORPORATION DID NOT RECEIVE THE ORIGINAL NOTIFICATION FOR THE RENEWAL OF THEIR CORPORATE CHARTER. AFTER SPEAKING WITH YOUR REPRESENTATIVE, I AM INCLUDING A CHECK IN THE AMOUNT OF \$ 150.00 TO COVER THE COSTS RELATING TO THIS PROCEDURE.

THANKING YOU IN ADVANCE FOR YOUR UNDERSTANDING AND COOPERATION, I REMAIN,

SINCERELY,

  
P. J. TESTA  
ACCOUNTANT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 29, 2004

P J TESTA ACCOUNTANT  
PO BOX 4562  
TAMPA, FL 33677

SUBJECT: ~~RIC RAG HOME IMPROVEMENTS, INC.~~  
Ref. Number: P02000134542

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Jeraline Saulsberry  
Document Specialist

Letter Number: 004A00047619