2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2004 8:00 am
Secretary of State
03-04-2004 90013 045 ***250.00

DOCUMENT # P03000049445

1. Entity Name
R AND S PLASTERING, INC.

Principal Place of Business	Mailing Address
P.O.BOX 2759 STUART FL 34995	P.O.BOX 2759 STUART FL 34995

36 W. High Pt Rd STUART FL 34996

2. Principal Place of Business	3. Mailing Address
Stuart Fl	PO Box 2759 Stuart Fl
Suite, Apt. #, etc. 2759	Suite, Apt. #, etc. 2759
City & State Stuart Fl	City & State Stuart Fl
Zip 34995 Country Martin	Zip 34995 Country

MOORE CR2E034 (11/03)

4. FEI Number 02-0690280 ☐ Applied For ☐ Not Applicable

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
STRACUZZI, ANTHONY 401 E OSCEOLA ST STUART FL 34994	Name Anthony STRACUZZI Street Address (P.O. Box Number is Not Acceptable) 36 West High Pt Rd City Stuart FL Zip Code 34996

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 Anthony Stracuzzi Pres 3-1-04
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
After May 1, 2004, Fee will be $550.00
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	STRACUZZI, ANTHONY		NAME		
STREET ADDRESS	P.O.BOX 2759		STREET ADDRESS		
CITY-ST-ZIP	STUART FL 34995		CITY-ST-ZIP		
TITLE	DV	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RUCCOLO, ANTHONY		NAME		
STREET ADDRESS	P.O.BOX 2759		STREET ADDRESS		
CITY-ST-ZIP	STUART FL 34995		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 all other like empowered.

SIGNATURE: ANThony STRACuzzi Pres. 3-1-04 772 213-2815
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

R & S PLASTERING INC.

P404113741
#P03000049445

P.O. BOX 2759
STUART, FL 34995

4/8/04

FLORIDA DEPOTMENT OF STATE
DIVISION OF CORPORATION
CORORATE RECORDS
P.O. BOX 6327
TALLAHASSEE, FL. 32314

REQUEST FOR REFUND OF OVERPAYMENT FOR ANNUAL PAYMENT.

THIS IS TO INFORM YOU THAT WE OVERPAYED OUR FEE. PLEASE SEND BACK TO OUR REFUND

SINCERLY

ANTHONY STRACUZZI PRES.

ANTHONY STRACUZZI
772-283-6826

FAX 772-286-7157

ANTHONY RUCCOLO
772-334-5316