# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Feb 23, 2004 8:00 am**
**Secretary of State**
02-11-2004 90001 038 ***150.00

DOCUMENT # P03000072887

1. Entity Name
RNGA ARCHITECTURE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 7366 PINEWALK DR SOUTH<br>MARGATE FL 33063 | 7366 PINEWALK DR SOUTH<br>MARGATE FL 33063 |

MOORE CR2E034 (11/03)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 6090 BOULEVARD of CHAMPIONS<br>Suite, Apt. #, etc. | 6090 BOULEVARD of CHAMPIONS<br>Suite, Apt. #, etc. |
| City & State: NORTH LAUDERDALE, FL | City & State: NORTH LAUDERDALE, FL |
| Zip: 33068 Country: USA | Zip: 33068 Country: USA |

4. FEI Number: 043 76 7579 ☐ 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 |
|---|---|
| GREEN, RODNEY NORTH<br>7366 PINEWALK DR SOUTH<br>MARGATE FL 33063 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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 _____ 2/4/04
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 / NAME / STREET ADDRESS / CITY-ST-ZIP | PRESIDENT<br>RODNEY NORTH GREEN<br>7366 Pinewalk Drive South<br>MARGATE, FL 33063 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VICE PRESIDENT<br>SPENCER JOSEPH GREEN<br>2265 SW 15 Street #165<br>Deerfield Beach, FL 33442 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SECRETARY<br>BARBARA MEDEIROS<br>3210 SE 10 Street #3C<br>POMPANO BEACH, FL 33062 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TREASURER<br>SPENCER JOSEPH GREEN<br>2265 SW 15 Street #165<br>Deerfield Beach, FL 33442 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ 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 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:** _____ 2/4/04 (954) 978-8060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #