2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000117494

1. Entity Name R&J MOTORS OF TAMPA, INC.

FILED May 05, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2313-B W. COLUMBUS DRIVE TAMPA. FL 33607 2313-B W. COLUMBUS DRIVE TAMPA, FL 33607



04292008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0317343

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MADRUGA, RIGOBERTO 2313-B W. COLUMBUS DRIVE TAMPA, FL 33607

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 Ag			required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			· .	U00000948356
TITLE PD NAME MADRUGA, RIGOBERTO STREET ADDRESS 2313-B W. COLUMBUS DRIVE TAMPA, FL 33607				06/02/08-80051-021 150.00
TITLE SD NAME HERNANDEZ, LETICIA STREET ADDRESS 2313-B W. COLUMBUS DRIVE TAMPA, FL 33607				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME SIRGET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP 12 hereby certify that the information cumplied with this			······································	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER C

4/29/08

(813)900-2340

Daytime Phone #