

2005 FOR PROFIT CORPORATION ANNUAL REPORT

8. **FILED**
Aug 29, 2005 8:00 am
Secretary of State

08-15-2005 90080 023 ***150.00

DOCUMENT # P04000054968 1. Entity Name RJB ATTORNEY SERVICES, INC.					
Principal Place of Business 1534 JAGUAR CIRCLE APOPKA, FL 32712			Mailing Address 1534 JAGUAR CIRCLE APOPKA, FL 32712		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		07212005 Chg-P CR2E034 (10/03)	
City & State		City & State		4. FEI Number 03-0539263	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PIXLEY, MARY C 5025 GREENBRIAR TRAIL MT. DORA, FL 32757				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
-FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 807.193(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 NAME STREET ADDRESS CITY-ST-ZIP	P BOPP, ROBERT J JR. 1534 JAGUAR CIRCLE APOPKA, FL 32712		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 registered agent empowered to execute this report as required by Chapter 807, 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:			8/25/05 407-889-2811		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

66026601



ATTACHMENT

66086601

Florida Department Of State
Divisions Of Corporations
Po Box 6327
Tallahassee, FL 32314

RJB Attorney Services, Inc.
Robert Bopp
1534 Jaguar Circle
Apopka, FL 32712

July 14, 2005

Re: P04000054968

Dear Sirs

This is a start up company. This is the first time we have ever been incorporated and were unaware of the annual filing requirements. The first correspondence regarding this matter was the post card we received. The additional \$400 late fee would create a financial hardship on our small business. We request that you waive this penalty and accept our check for \$150.00.

Enclosed Please find a check for \$150.00

Thank You



Robert Bopp
RJB Attorney Services, Inc.