

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000095484

Entity Name: RIJAI EQUIPMENT, CORP

FILED
Jul 02, 2006
Secretary of State

Current Principal Place of Business:

22407 SW 126 AVE
MIAMI, FL 33170

New Principal Place of Business:

Current Mailing Address:

22407 SW 126 AVE
MIAMI, FL 33170

New Mailing Address:

FEI Number: 20-1285972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAIME, RICARDO
22407 SW 126 AVE
MIAMI, FL 33170 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JAIME, RICARDO
Address: 22407 SW 126 AVE
City-St-Zip: MIAMI, FL 33170

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: PEREZ, GEORGINA
Address: 22407 SW 126 AVE
City-St-Zip: MIAMI, FL 33170

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICARDO JAIME

P

07/02/2006

Electronic Signature of Signing Officer or Director

Date