

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90210 008 \*\*\*150.00

DOCUMENT # P05000125884					
1. Entity Name <b>R J &amp; M FAMILY, INC.</b>					
Principal Place of Business <del>6460 LAKE WORTH ROAD</del> <del>LAKE WORTH, FL 33463</del>			Mailing Address <del>6460 LAKE WORTH ROAD</del> <del>LAKE WORTH, FL 33463</del>		
2. Principal Place of Business <b>9789 VINEYARD CT.</b>		3. Mailing Address <b>9789 VINEYARD CT.</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>BOCA RATON, FL</b>		City & State <b>BOCA RATON, FL</b>		4. FEI Number <b>20-3477966</b>	
Zip <b>33428</b>		Country <b>USA</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required			
6. Name and Address of Current Registered Agent  <b>JOSEPH K. NOFIL, P.A.</b> <b>3284 NORTH STATE ROAD 7</b> <b>LAUDERDALE LAKES, FL 33319</b>			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		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 reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> 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	PSTD HERNANDEZ, RAMIRO <del>6460 LAKE WORTH ROAD</del> <del>LAKE WORTH, FL 33463</del> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ESTHER J. CAPOTE</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
				<b>9789 VINEYARD COURT</b>	
				<b>BOCA RATON, FL 33428</b>	
				<b>9789 Vineyard Ct.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
				<b>BOCA RATON, FL 33428</b>	
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: 			4-23-06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			Daytime Phone #		

40061060



03192006 Chg-P CR2E034 (11/05)