

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000148690

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: RJSEE, INC.

**Current Principal Place of Business:**

5637 AKRA AVE  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

**Current Mailing Address:**

5637 AKRA AVE  
JACKSONVILLE, FL 32205

**New Mailing Address:**

FEI Number: 02-0761095      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JACINTO, ROLANDO  
5637 AKRA AVE  
JACKSONVILLE, FL 3205      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: JACINTO, ROLANDO  
Address: 5637 AKRA AVE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: S      ( ) Delete  
Name: JACINTO, SANDRA  
Address: 5637 AVE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D      ( ) Delete  
Name: CHAVEZ, EDGAR  
Address: 9536 PRINCETON WQUAR APT 1216  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D      (X) Delete  
Name: BLAS MARTINEZ, OSCAR  
Address: 9359 103RD ST LOT 200  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ROLANDO JACINTO

P

03/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date