### 2008 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # P06000133090

1. Entity Name

R. J. OIL INTERNATIONAL CORP.



Principal Place of Business

1410 DOUGLAS ROAD SUITE 3 CORAL GABLES, FL 33134 Mailing Address

1410 DOUGLAS ROAD SUITE 3 CORAL GABLES, FL 33134

# FILED Apr 28, 2008 08:00 AN Secretary of State



### DO NOT WRITE IN THIS SPACE

03132008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-5772981

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARBONELL, JORGE 1410 DOUGLAS ROAD SUITE 3 CORAL GABLES, FL 33134

## DO NOT WRITE IN THIS SPACE

-1.0	the state of the s		•			
8. The above the obligat SIGNATURE.	named entity submits this statement for the prions of registered agent.  Signature, typed or printed name of registered agent and title if	·		egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS	ŀ			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CARBONELL, JORGE 1410 DOUGLAS ROAD SUITE 3 CORAL GABLES, FL 33134	· · ·		U00000928045 nszanzas-angsn-n23 150.		
TITLE , , NAME , STREET ADDRESS CITY-ST-ZIP	VSTD ROMAGUERA, RAFAEL G 5555 NW 5TH ST #40 MIAMI, FL 33126				937 287 88 88838 828 138188	
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME					:	

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:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

MERONELL 03/13/2008

Daytime Phone #