2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 06, 2008 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # P06000133566 1. Entity Name RAYCO AUTO INTERIORS & ACCESSORIES, INC.								08-06-2008		·8 ***15€	9.00
Principal Place 3121 CENTR ST. PETERSB	AL AVENUE		Mailing Address 3121 CENTRAL AVENUE ST. PETERSBURG, FL 33713			PANADOA					
2 Principal P. Suite, Apl.	Coxto	ness - No P.O. Box#	3. Mailing Address 3. Mailing Address 3. Mailing Address Suite, Apt. #, etc.			J	07282008	Chg-P		4 (12/06)	
Sity & State	رماكرها	FL	City & Sta	City & State			4. FEI Number 06-1797731				pplied For at Applicable
3371	3 ——1	Country	Zip		Country			of Status Desired		8.75 Add	litional
	6. Name	and Address of Current	Name	7. Name and Address of New Registered Agent Name							
JACKSON, JOHN L 3121 CENTRAL AVENUE ST. PETERSBURG, FL 33713						Street Address (P.O. Box Number is Not Acceptable)					
					City				FL	Zip Code	e
		y submits this statement for	or the purpose of	of changing its re	gistered office or	register	red agent, or bo	th, in the State of Flo		ımiliar with,	and accept
,	ions of regisi ,	tered agent.									
SIGNATURE_	Signature, typed	or printed name of registered agent	and little if applicable	, (NOTE: R	agistared Agent signatu	re required	d when reinstating)		DATE		
		! FEE IS \$150.00 otember 12, 2008		ection Campaign rust Fund Contrib	~		.00 May Be led to Fees	In accordance v corporation did	with s. 607. not receive	193(2)(b), l the prior r	F.S., the notice.
10.	i _	OFFICERS AND			11.		ADDITIONS	CHANGES TO OFF	ICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4901 NO	N, JOHN L RTH ARMENIA AVENU FL 33603		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY+ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
l of the cor	raaratiaa ar t	e information supplied wit of or supplemental report i he receiver or trustee emp achment with an address,	invariant to aver	rute this report as	the exemptions c signature shall h required by Cha	pter 607	d in Chapter 11! same legal effer 7, Florida Statuti	e, Florida Statutes. I ot as if made under as; and that my nam	further certi oath; that I a e appears in	ly that the in m an officer Block 10 or	nformation or director Block 11 if