2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000000719

1. Entity Name
RENALDO DESIGN COMPANIES, INC.

Principal Place of Business
3725 WEST GRACE STREET
SUITE 150
TAMPA, FL 33607 US

Mailing Address
3725 WEST GRACE STREET
SUITE 150
TAMPA, FL 33607 US

01192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3156626
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RENALDO, JAMES A
3725 WEST GRCE STREET
SUITE 150
TAMPA, FL 33607

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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 accep the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RENALDO, PATRICIA A
STREET ADDRESS	3725 WEST GRACE STREET, SUITE 150
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D
NAME	RENALDO, JAMES A
STREET ADDRESS	3725 WEST GRACE STREET, SUITE 150
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D
NAME	RENALDO, DIANA
STREET ADDRESS	3725 WET GRACE STREET, SUITE 150
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	D
NAME	RENALDO, STUART J
STREET ADDRESS	3725 WEST GRACE STREET, SUITE 150
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/22/04-80029-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 i changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: STUART RENALDO 1/19/04 813 348-9166