

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 08, 2004 8:00 am**  
**Secretary of State**

06-22-2004 90002 030 \*\*\*150.00  
07-08-2004 90093 020 \*\*\*400.00

54060333

**DOCUMENT # P94000031514**

1. Entity Name  
R.J'S MICA, INC.



Principal Place of Business  
270 N.W. 73RD STREET  
MIAMI, FL 33150

Mailing Address  
270 N.W. 73RD STREET  
MIAMI, FL 33150

**DO NOT WRITE IN THIS SPACE**



03292004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0487720

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

JABAR, ABDOOL S  
318 NW 153 AVE  
APT. F403  
PEMBROKE PINES, FL 33028

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and fee 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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PSTD  
JABAR, ABDOOL S  
318 NW 153 AVE  
PEMBROKE PINES, FL 33028

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
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NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Abdool Shabeeb Jabar*

ABDOOL SHABEEB JABAR PRES. 06/16/04 (305) 757-7429

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #