2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Florida OFFLET STate Aug 05, 2004 08:00 AM Secretary of State DOCUMENT # P94000032793 R & J REALTY SERVICES, INC. Mailing Address Principal Place of Business 820 WIDEES RD 4815 E. BUSCH BLVD. LAKELAND, FL 33809 US SUITE 201F TAMPA, FL 33617 US 07262004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-3249761 \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent FERREIRA, RANDY X DO NOT WRITE 820 W DEES RD LAKELAND, FL 33809 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 ac-SIGNATURE. Semanure, broad or printed name of registered agent and title if applicable. (NOTE: Registered Agent aigneture required when reinstating) DATE U00000169419 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 08/05/04-80002-008 550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS 10. me FERREIRA, RANDY X NAME 34331 MISSION VALLEY DR STREET ADDRESS CITY-ST-ZP DADE CITY, FL TITLE FERREIRA, JULEE A NAME 34331 MISSION VALLEY DR STREET ADDRESS DADE CITY, FL CITY-ST-DP सस ह NAME STREET ADDRESS DO NOT WRITE CKY-ST-ZIP IN THIS SPACE BILE MALIF STREET ADDRESS CITY-ST-ZIP

CATY-ST-ZAP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes, I further certify that the information indicated on this report or supplemental FeDO is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the comporation or the receiver of trustee expressed to execute this proper as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address with all other like empowered.

SIGNATURE:

333L£ NAME STREET ADDRESS CITY-ST-ZIP राफ ह NAME STREET ADDRESS

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Randy X Ferreira