

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2004 8:00 am
Secretary of State

06-28-2004 90009 031 ***150.00

DOCUMENT # P94000072886

1. Entity Name
RJJB & G, INC.



Principal Place of Business
**C/O ATLANTIC FILTER CORPORATION
3112 45TH STREET
WEST PALM BEACH, FL 33407**

Mailing Address
**C/O ATLANTIC FILTER CORPORATION
3112 45TH STREET
WEST PALM BEACH, FL 33407**

54058967



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06242004

Chg-P

CR2E034 (10/03)

4. FEI Number
65-0530710

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THIBADEAU, PAUL
50 SOUTH US HWY ONE
STE 200
JUPITER, FL 33477**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BALDRICA, ROBERT G**
STREET ADDRESS **11644 LANDING PLACE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33408**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **SCHERER, JAMES F**
STREET ADDRESS **11644 LANDING PLACE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33408**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DST** ☐ Delete
NAME **WAKEM, JAMES W II**
STREET ADDRESS **855 COUNTRY CLUB DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH, FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **PELLINGTON, GEORGE S JR**
STREET ADDRESS **P. O. BOX 1309**
CITY-ST-ZIP **JUPITER, FL 33468**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/24/04
Date

561-683-0101
Daytime Phone #