


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 14, 2004 8:00 am**  
**Secretary of State**

06-14-2004 90005 040 \*\*\*550.00

<b>DOCUMENT # P95000097883</b> 1. Entity Name <b>RON JASON, INC.</b>			
Principal Place of Business <b>6981 N.W. 5TH STREET PLANTATION, FL 33317</b>		Mailing Address <del>6981 N.W. 5TH STREET</del> <del>PLANTATION, FL 33317</del>	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 22-3592</b> Suite, Apt. #, etc.	
City & State		City & State <b>Hollywood FL</b>	
Zip		Zip <b>33022-3592</b>	
Country		Country	
6. Name and Address of Current Registered Agent  <b>KANELIDIS, NICK B 2400 EAST COMMERCIAL BLVD. SUITE 706 FT. LAUDERDALE, FL 33308</b>		7. Name and Address of New Registered Agent Name <b>RONALD J. BENEDETTO</b> Street Address (P.O. Box Number is Not Acceptable) <b>2648 WILSON ST</b> City <b>Hollywood</b> <b>FL</b> Zip Code <b>33020</b>	
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 <u><i>Ronald J. Benedetto</i></u> <span style="float: right;">5/25/04</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BENEDETTO, RONALD J 6981 N.W. 5TH STREET PLANTATION, FL 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u><i>Ronald J. Benedetto</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>5/25/04</u> Daytime Phone # <u>(954) 922-0886</u>	

**44046511**



03182003 Chg-P CR2E034 (10/03)

4. FEI Number **65-0644683** Applied For ☐ Not Applicable

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