

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007643

FILED
Apr 14, 2004
Secretary of State

Entity Name: R & A BUILDERS, INC.

Current Principal Place of Business:

2400 S.E. MIDPORT ROAD., #210
SUITE #206
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

2400 S.E. MIDPORT ROAD., #210
SUITE #206
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 65-0658653 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORSO, ROSE
3445 S.E. HART CL
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, RICHARD S
Address: 567 RAYN AVE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D () Delete
Name: CORSO, ROSE
Address: 3445 S.E. HART CL
City-St-Zip: PORT ST LUCIE, FL 34984

Title: VP () Delete
Name: UZ, LISA ANN
Address: 3441 SE HART CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA ANN UZ

VP

04/14/2004

Electronic Signature of Signing Officer or Director

_____ Date