

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90059 030 ***158.75

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1. Entity Name

RALEIGH GROUP INVESTMENTS, INC.



Principal Place of Business

**101 SW 31ST AVENUE
FORT LAUDERDALE FL 33312**

Mailing Address

**1133 S. UNIVERSITY DR.
#202
PLANTATION FL 33324
US**

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

101 SW 31st Ave.

Suite, Apt. #, etc.

City & State

City & State

Fort Lauderdale FL 33312

Zip

Country

Zip

33312

Country

Broward

4. FEI Number

65-0641893

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

**WAEI, DAHSHEH
1681 NW 100TH WAY
PLANTATION FL 33322**

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

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution

☐

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

10. OFFICERS AND DIRECTORS

TITLE **PVST** ☒ Delete
NAME **WAEI, DAHSHEH**
STREET ADDRESS **1681 NW 100TH WAY**
CITY-ST-ZIP **PLANTATION FL 33322**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☒ Addition
NAME **JAMAL, ALJIZARLY**
STREET ADDRESS **101 SW 31st Ave.**
CITY-ST-ZIP **Fort Lauderdale FL 33312**

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

TITLE ☐ Change ☐ Addition
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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

Date

Daytime Phone #