2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000016355

RFJD HOLDING CO., INCORPORATED



FILED Jan 28, 2008 08:00 AM **Secretary of State**

CR2E034 (11/05)

Principal Place of Business

5440 N ST RD R

NAME STREET ADDRESS CITY-ST-ZIP .

changed, or on an attag

SIGNATURE:

SUITE 223 FT LAUDERDALE, FL 33319 Mailing Address

5440 N ST RD 7

SUITE 223

FT LAUDERDALE, FL 33319



No Chg-P

01232008

5. Certificate of Status Desired \$8.75 / Fee Requirement Agent DONATH, GERALD 5440 N ST RD 7 #223 FORT LAUDERDALE, FL 33319 5. Certificate of Status Desired \$8.75 / Fee Requirement Properties of Status Desired \$1.75 / Fee Requirement Properties of Status Desired \$8.75 / Fee Requirement Properties of Status Desired Properties of Status Desired Pro	Not Applicable Additional uired
DONATH, GERALD 5440 N ST RD 7 #223 FORT LAUDERDALE, FL 33319 B. 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 the state of Florida.	
FORT LAUDERDALE, FL 33319 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 the state of Florida.	
	4
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 alignature required when renetating) DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Added to Fees Added to Fees	alle ar in the
10.~ OFFICERS AND DIRECTORS ()	17 50 A 3 50 C
IITLE D NAME DONATH, GERALD SIREET ADDRESS 5440 N ST RD 7 #223 CITY-SI-ZIP FORT LAUDERDALE, FL 33319 IITLE D	
MAME FIESTAL, ROBERT STREET ADDRESS 5440 N. ST RD 7 #223 CITY-S1-ZIP FORT LAUDERDALE, FL 33319	íma po
TIILE MANE STREET ADDRESS CITY-S1-ZIP DO NOT WRITE	150.00
TITLE NAME STREET ADDRESS CITY-S1-ZIP	'm , * \$
IIILE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 received or trustee ampowered to execute this report is required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if