

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90019 001 ***150.00

DOCUMENT # P97000056355

1. Entity Name
RJB SERVICES, INC.



Principal Place of Business

~~7600 DESOTO DR~~ 4503-15th ST. CT. E.
ELLENTON, FL 34222

Mailing Address

PO BOX 1146
ONECO, FL 34264

11011000

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02022004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3456550	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSIERE, JERRY L
~~7600 DESOTO DR~~ 4503-15th ST. CT. E.
ELLENTON, FL 34222

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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, 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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUSIERE, ROBERTA J 7600 DESOTO DR 4503-15 th ST. CT. E. ELLENTON, FL 34222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUSIERE, JERRY L 7600 DESOTO DR 4503-15 th ST. CT. E. ELLENTON, FL 34222
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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: Roberta J. Busiere ROBERTA J. BUSIERE 2/15/04 941-722-9203
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #