## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 22, 2007 08:00 A Secretary of State

ANNUAL REPURI		
DOCUMENT # P9800 1. Entity Name R. J. COLE, INC.	00023294	
Principal Place of Business	Mailing Address	
6287 BAHIA DEL MAR CIRCLE BLDG P UNIT 908 St. Petersburg, FL 33715	6287 BAHIA DEL MAR CIRCLE BLDG P UNIT 908 ST. PETERSBURG, FL 33715	

## No Chg-P 03172007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3499525 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COLE, RICHARD J DO NOT WRITE 6287 BAHIA DEL MAR CIRCLE BLDG.P, UNIT 908 ST. PETERSBURG, FL 33715 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 Agen) signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DPS TITLE NAME COLE, RICHARD J STREET ADDRESS 6287 BAHIA DEL MAR CIRCLE, BLDG.P, UNIT 908 ST. PETERSBURG, FL 33715 CITY-ST-ZIP 03/30/07-80006-009 150.00 TITLE VPT COLE, JANE E NAME STREET ADDRESS 6287 BAHIA DEL MAR CIRCLE, BLDG.P, UNIT 908 ST. PETERSBURG, FL 33715 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE 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

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 eath; 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

Richard Cole

SIGNATURE

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/07 (201) 576-518