2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000083505

1. Entity Name

R.J.D. CORPORATION



FILED Feb 04, 2008 08:00 Al Secretary of State

Principal Place of Business

6681 NW 16TH TERRACE FORT LAUDERDALE, FL 33309 Mailing Address

6681 NW 16TH TERRACE FORT LAUDERDALE, FL 33309



DO NOT WRITE IN THIS SPACE

01142008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0868000

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, ROBERT J 6681 NW 16TH TERRACE FORT LAUDERDALE, FL 33309

DO NOT WRITE IN THIS SPACE

•		i.			divinity of the day of the state of the stat	1
	e named entity submits this statement for the pitions of registered agent.	urpose of changing its registered	office or re	gistered agent, or bo	oth, in the State of Florida. I am familiar with, and acc	:ept
SIGNATURE	Signature, typeo or printed name of registered agent and title i	I applicable (NOTE Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			(JECT 1)	CONTRACTOR OF THE PROPERTY OF	The second of th	Q.5
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, ROBERT J 6681 NW 16TH TERRACE FORT LAUDERDALE, FL 33308				The later and the second secon	
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TITLE NAME STREET ADDRESS					A CONTRACTOR OF THE PARTY OF TH	

DO NOT WRITE IN THIS SPACE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 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:

CITY-ST-7IP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-08 (954) 968191