

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90258 047 ***150.00

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1. Entity Name
RG ENTERPRISES, INC.



Principal Place of Business
1612 SOUTHWEST 19TH AVENUE
BOCA RATON, FL 33486

Mailing Address
1612 SOUTHWEST 19TH AVENUE
BOCA RATON, FL 33486

2. Principal Place of Business
33 SE 4th ST

3. Mailing Address
33 SE 4th ST

Suite, Apt. #, etc.
Suite 102

Suite, Apt. #, etc.
Suite 102

City & State
Boca Raton FL

City & State
Boca Raton FL

Zip
33432

Country
Palm Beach

01182005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0901534

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CASLOW, RAYMOND L
1628 N. FEDERAL HIGHWAY #204
FORT LAUDERDALE, FL 33305-2529

7. Name and Address of New Registered Agent

Name Thomas E Stroud Esq
Street Address (P.O. Box Number is Not Acceptable)
33 SE 4th ST Ste 102
City Boca Raton FL Zip Code 33432

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 *Thomas E Stroud*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

2-28-05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME GOMBOS, RICHARD
STREET ADDRESS 1612 SOUTHWEST 19TH AVENUE
CITY- ST- ZIP BOCA RATON, FL 33486

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President Director ☒ Change ☐ Addition
NAME Robert Feldman
STREET ADDRESS 33 SE 4th ST Ste 102
CITY- ST- ZIP Boca Raton FL 33432

TITLE
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CITY- ST- ZIP

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:

Pres. Feldman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-05

Date

561-392-6050

Daytime Phone #