


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000054304 1. Entity Name R.G.R. ENTERPRISES, INC.	
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Principal Place of Business 10725 SW 216 ST UNIT 308 MIAMI, FL 33170	Mailing Address 10725 SW 216 ST UNIT 308 MIAMI, FL 33170
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01212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0936464	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RODRIGUEZ, JORGE M 10725 SW 216 ST UNIT 308 MIAMI, FL 33170

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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:  Jorge M. Rodriguez, Secretary	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RODRIGUEZ, JORGE M 10725 SW 216 ST MIAMI, FL 33170
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUERRA, ELENA R 10725 SW 216 ST MIAMI, FL 33170
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RODRIGUEZ-RIVERA, LOURDES 10725 SW 216 ST MIAMI, FL 33170
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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 life empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	1/21/04 305-242-091 Date Daytime Phone #
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