

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000075098

1. Entity Name
R & B CENTRAL ENTERPRISES, INC.



Principal Place of Business
4185 W LAKE MARY BLVD
LAKE MARY, FL 32746

Mailing Address
301 COLUMBUS CIRCLE
LONGWOOD, FL 32750



04282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3606845

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

TAYLOR, RODGER C
301 COLUMBUS CIRCLE
LONGWOOD, FL 32750

**DO NOT WRITE
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, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME TAYLOR, RODGER C
STREET ADDRESS 301 COLUMBUS CIRCLE
CITY-ST-ZIP LONGWOOD, FL 32750

TITLE D
NAME TAYLOR, BEATRIZ I
STREET ADDRESS 301 COLUMBUS CIRCLE
CITY-ST-ZIP LONGWOOD, FL 32750

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

U00000352489
05/03/05-80029-020 150.00

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IN THIS SPACE**

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:

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #