2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2008 08:00 A Secretary of State **DOCUMENT # \$41433** R & J INNOVATIONS, INC. Principal Place of Business Mailing Address 1472 SOUTHWIND DRIVE 1472 SOUTHWIND DRIVE CASSELBERRY, FL 32707 US US CASSELBERRY, FL 32707 No Chg-P CR2E034 (11/05) 04042008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3058248 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent CULTON, ROBERT H., II P.A. DO NOT WRITE **499 EAST CENTRAL PARKWAY** SUITE 120 IN THIS SPACE ALTAMONTE SPRINGS, FL 32701 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE NULE HUGHES, JOHN G. STREET ADDRESS 1472 SOUTHWIND DRIVE CASSELBERRY, FL 32707 CITY-ST-ZIP H00000883044 TITLE 04/18/08-80065-008 150.00 MYERS, JAMES R. NAME STREET ADDRESS 237 ROBIN RD. CITY-ST-ZIP ALTAMONTE SPRNGS, FL MILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 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

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

April 4, 2008 407 696-2746