

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V41150** (6)
1. Corporation Name
RAJAY'S II, INC.



Principal Place of Business
**8000 W. BROWD BLVD
SUITE 5014
PLANTATION FL 33324
US**

Mailing Address
**8000 W. BROWD BLVD.
5014
PLANTATION FL 33322
US**

3. Date Incorporated or Qualified **06/04/1992** 3a. Date of Last Report **05/01/1995**
4. FEI Number **65-0338490** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**
6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
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29
30

2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

9. Name and Address of Current Registered Agent

**ROGOVIN, LAWRENCE H.
17071 W. DIXIE HWY
SUITE B
N. MIAMI BEACH FL 33160**

10. Name and Address of New Registered Agent

81 Name **MARTIN R. MAUNINGEN USA**
82 Street Address (P.O. Box Number is Not Acceptable) **MARTIN R. MAUNINGEN PA**
83 **4800 N. FEDERAL HWY, D-207**
84 City **BOCA RATON** 85 Zip Code **FL 33431**

11. Pursuant to the provisions of Sections 607.051(2) and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature] **MARTIN R. MAUNINGEN**

4/20/96

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | DELETE |
|-------|----------------|------------------|---------------------|--------------------------|
| D | KASEN, RICHARD | 1741 NW 93 TERR. | PLANTATION FL 33322 | <input type="checkbox"/> |
| D | BINKOW, ANN | 1741 NW 93 TERR. | PLANTATION FL 33322 | <input type="checkbox"/> |
| D | GREEN, BARRY | 1741 NW 93 TERR. | PLANTATION FL 33322 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP | Change | Addition |
|-----------|----------|--------------------|---------------------|--------------------------|--------------------------|
| 2.1 TITLE | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1 TITLE | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature] **Richard Kase**

4/20/96 954-5405

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (12/95)