FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90123 041 ***150.00

DOCUMENT # L24286 1. Corporation Name

P.V.J.R., INC.

Principal Place	of Business	Mailing Address			. (Adita): B/P (Idit A)utu t	188t 1811 A BILL BIBLI GIGI	. 4180 41811 4	(9)(9) 9 ()
RODICK, JEFFERY 343 S.W. 14TH AVE. POMPANO BEACH FL 33069		RODICK. JEFFERY A 343 S.W. 14TH AVE. POMPANO BEACH FL 33069			DO NOT WRITE IN THIS SPACE			
us us				3. Date Incorporated or Qualifed				
		10.90 4.11			10/18/1989 4 FEI Number	<u> </u>		aliad Ear
 -	ace of Business	2a. Mailing Address			65-0166053			plied For t Applicable
21 Suite Ant #	i etc	26 Suite, Apt. #, etc.					\$8.75 A	
Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 27					5. Certifcate of Status Desir	ed 🗌	Fee Re	
City & State	,	City & State			6. Election Campaign Finan	cing _	\$5.00	May Be
23		28			Trust Fund Contribution Added to Fees			
Zip	Country Zip		Countr	у	8. This corporation owes the current year Intangible			
24	25	25 29 30			Personal Property Tax. Yes No			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of M	lew Registered Ac	jent	
P ∩Ni	OK IEEEDEV V		8	l Name		A 11.	,	
RODICK, JEFFREY A 3246 NW 118 LN			8:	2 Street	dress (P.O. Box Number is Not Acceptable)			
CORAL SPRINGS FL 33069						1 2 1		
00/2	AE OF THIT GO TE 30003		8:	* [
			8-	City		FL	85 Zip (Code
		00 J C07 1500 Florido Ctotut		vo namad	corporation submits this statement for	· · · · · · · · · · · · · · · · · · ·	anging its	registered
office or re	o the provisions of Sections 607.05 egistered agent, or both, in the State n familiar with, and accept the oblig	e of Florida. Such change was a	uthorized by	/ the corp	oration's board of directors. I hereby	accept the appoint	nent as re	gistered
SIGNATURE						DATE		
OFFICE AND DIDECTORS				ent signature	required when reinstating) ADDITIONS/CHANGES To	DATE O OFFICERS AND	DIRECTO	RS IN 12
TITLE	VSD	Doctor			1 100	1	Change	☐ Addition
NAME	RIDICK, JEFFREY ALLEN	_	1.2 NAME		popick Jeffrey	AlleN	;	
STREET ADDRESS	0040 1134 440 1415		1.3 STRE	ET ADDRESS	RODICK Jeffrey 3246 NW 1184 W Cotal Springs FL	Water Comment	1	
CITY-ST-ZIP	CORAL SPRINGS FL		14 CITY-	ST-ZIP	ColalSprines FL	enaka L	16822	
TITLE	VSD	☐ DELETE	2.1 TITLE			<u>-</u>	Change	☐ Addition
NAME	SCHWARTZ, JAY		2.2 NAME			ع الله الله		•
STREET ADDRESS			2.3 STRE	ET ADDRESS		15, 53.		
CITY-ST-ZIP	CORAL SPRINGS FL 2.40		2. 4 CITY	ST-ZIP		<u> </u>	<u> </u>	
TITLE		☐ OELETE	3.1 TITLE			I	☐ Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STRE	ET ADORESS				
CITY-ST-ZIP			3.4. CITY-			.		- A deliking
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAMI					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-	ST-ZIP			Change	Addition
TITLE		L'1 DEFEIE	5.1 TITLE 5.2 NAME				onange	
NAME			1	ET ADDRESS				
STREET ADDRESS			5.4 CITY-				-	ĺ
CITY-ST-ZIP		DELETE	6.1 TITLE			<u></u>	Change	Addition
		-J 022212	6.2 NAME		,			_
NAME STREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZIP			6.4 CITY-		}			

14. 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 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: