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FILED
Apr 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000004372 (3)

1. Corporation Name

R.J.R. ASSOCIATES, INC.

Principal Place of Business

9000 WEST SHERIDAN STREET
SUITE 100
PEMBROKE PINES FL 33024

Mailing Address

9000 WEST SHERIDAN STREET
SUITE 100
PEMBROKE PINES FL 33024

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1997

4. FEI Number

65-0726437

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1813 S. ST. RD #7

Suite, Apt. #, etc.

22

City & State

23 FT. LAUD., FLA.

Zip

24 33317

Country

25 Broward

2a. Mailing Address

26 1813 S. ST. RD #7

Suite, Apt. #, etc.

27

City & State

28 FT. LAUD., FL.

Zip

29 33317

Country

30 Broward

9. Name and Address of Current Registered Agent

KORN, GARY A
20803 BISCAYNE BLVD
SUITE 200
AVENTURA FL 33008

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

DPS
ORSI, RAYMOND F
9000 WEST SHERIDAN ST, STE 100
PEMBROKE PINES FL 33024

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VP
ORSI, RAYMOND JR.
1813 S. ST. RD 7
FT. LAUD. FL. 33317

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TRES.
JOHN ORSI SR.
1813 S. ST. RD. 7
FT. LAUD FL. 33317

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE:

JOHN R. ORSI

3/20/98 954.583.2292

CR2E034 (10/97)