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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 344535

1. Corporation Name

R J B CORP

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

02-11-1999 90033 012 ***150.00

| n 3 b 00 | JNF | | | | | | | | | |
|--|------------------------------------|-----------------------|-------------------------------|--|---|--|---|-------------------------|-----------------------|--------|
| Principal Place | of Business | | Mailing Address | | | | *************************************** | | | |
| 1000 NW 25TH AVE. | | 1000 NW 25TH AVE. | | | | | | | | |
| MIAMI FL 33125 | | MIAMI FL 33125 | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | | 3. Date Incorporated or Qualifed | | | |
| | | | | | | | 04/15/1969 | • | | |
| 2. Principal Place of Business | | | 2a. Mailing Address | | | | 4. FEI Number | App | lied For | |
| 2. Fillicipal Flace of Business | | 26 | | | | 59-1272965 | Not | Applicable | 15 | |
| Suite. Apt. | Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 Ad | | |
| 22 | | 27 | | | | 3. Certificate of Challes Doubles | Fee Req | | | |
| City & State | | City & State | | | | 6. Election Campaign Financing | \$5.00 N | , | | |
| 23 | | 28 | | | | Trust Fund Contribution Added to Fees | | | | |
| Zip Country | | Zip Country | | | | 8. This corporation owes the current year Intangible | | | | |
| 24 | | 5 | 29 | 30 | I | | Personal Property Tax. 10. Name and Address of New Registered | | ===== | |
| | 9. Name a | nd Address of Current | Registered Agent | | 81 | Name | 10. Haille died Addiess of Herr Registers | | | |
| WAQ | SERSTROM | RARRY | | | | | | | | |
| | BSICAYNE | | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| | MI FL 33157 | | | | 83 | 1 | · · · · · · · · · · · · · · · · · · · | | | |
| 1111/111 | 5 00 101 | | | | | | <u>。 </u> | () () () () () () | ado: | |
| | | | | | 84 | City | F | L 85 Zip Co | Jue | |
| | registered age ım familiar witl | | ions of, Section 607.0505, Fl | lorida Stal | tutes. | ne corporatio | oration submits this statement for the purpose in's board of directors. I hereby accept the app | | | ć |
| 12. | orginatore, typed t | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFICERS / | | (S IN 12 | 3 |
| TITLE | VS | | ☐ DELETE | 1.1 T | TLE | | N 1 1875 | ☐ Change 、 | Addition | 3 |
| NAME | BENNETT, | LESTER | | 1.2 N | IAME | | | | ĺ | Š |
| STREET ADDRESS | | SEPHINE SHR RD | | 1.3 S | TREET | ADDRESS | | • | | į |
| CITY-ST-ZIP | SEBRING | FL | | | CITY-ST | -ZIP | | ☐ Change | ☐ Addition | |
| TITLE | VDP | | ☐ DELETE | 2.1 T | | | | ☐ cusude | | |
| NAME | | ROSE MARIE | | | IAME | | | | | |
| STREET ADDRESS | 1 | 25 AVENUE | | 2.3 5 | STREET | ADDRESS | | | | ı |
| CITY-ST-ZIP | MIAMI FL | | | | | | | ~ ^# · | : 1 | ٠. |
| TITLE | | | □ pri ste | | CITY-S | T-ZIP | | Change | ☐ Addition | |
| NAME . | 1 | • | ☐ DELETE | 3.1 T | TITLE | T-ZIP | | Change | ☐ Addition | l İ |
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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 13/1 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 Date Dayline P

CRATIOS# (11/30