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

PROFIT CORPORATION ANNUAL REPORT

1997

VIRJO, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 562358

(2)

FILED Jan 24 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Ac	Mailing Address 601 ROOSEVELT BOULEVARD TARPON SPRINGS FL 34689-3172				1 (0015) Dilip dilip binib 15600 timbi dilibi dilipi dilipi dilipi dilipi dilipi dilipi dilipi				
	LT BOULEVARD NGS FL 34689-3172										
							3. Date Incorporated or Qualified 03/17/1978	3a. Date of 03/19/1		eport	
2. Principal P	lace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number			plied For	
21		26	_ 				59-1806292 Not Applicable				
Suite, Apt	#, etc.	Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$ ¹		Additional	
22		27	Otata .						Fee Re		
City & Stat	е	— ·	City & State				6. Election Campaign Financing	\$5.00 May Be Added to Fees			
Zip	Country	28 Zip		Co	untry		Trust Fund Contribution				
24	25	29		30	u y		8. This corporation has liability for in Florida Statutes	Yes N		. 198.032,	
24[9. Name and Address of Curre		gent	<u> </u>	Ι.		10. Name and Address of New Re	· · · · · · · · · · · · · · · · · · ·			
RAP	OSA, JOSEPH D.				81	Name				······································	
	ROOSEVELT BLVD.						/50 6 N				
	PON SPRINGS FL 33589				62	Street Add	iress (P.O. Box Number is Not Acceptab	10)			
					63						
					84	City		FL 85	Zip	Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508	, Florida Statute	es, the e	bove	e-named cor	poration submits this statement for the p	rpose of cha	nging it	s registered	
office or r	registered agent, or both, in the Sta	te of Floride, Such	n change was a	suthorize vida Sta	d by	y the corpora	tion's board of directors. I hereby accep	t the appointr	nent as	registered	
		1 Com	7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		υ.	24/	17/0	7		
SIGNATURE	Signature is red or print? I name of registered a	gent and title if ago cab	de INOTI	E Registeri	ed Age	ent signature requ	ired when reinstating)	CATE			
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC			S IN 12	
TITLE	PD V		DELETE	1.1 TITL		ļ			Change	Addition	
NAME	RAPOSA, JOSEPH D			1.21	IAME						
STREET ADDRESS			1.3 \$			ADDRESS					
City - ST - ZiP	TARPON SPRINGS FL			1.4 (ITY-\$	iT - ZIP					
TITLE	·-		2.1 T	2.1 TITLE			اللا	Change	Addition		
NAME	RAPOSA, VIRGINIA			2.2 1	3MAI	ľ					
STREET ADDRESS	601 ROOSEVELT BLVD.			2.3 5	2.3 STREET ADDRESS						
CITY - ST - ZIP	TARPON SPRINGS FL			2.4	CITY-	ST-ZIP					
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NAME					IAME						
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NAME					NAME	ĺ					
STREET ADDRESS						ADDRESS					
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NAME				4	AME						
STREET ADDRESS						ADDRESS					
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THELE			DELETE	1	ITLE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•	닖	Change	Addition	
NAME					AME						
STREET ADDRESS						T ADDRESS					
CITY - ST - ZIP				6.4 (HY-5	ST-ZIP					

14. I do 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 attachnept with an address.

SIGNATURE:

STATURE AN TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/17/97

P13-98Y-497)