

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 663157  
1. Corporation Name TRJ Enterprises Inc

Principal Place of Business 1843 Harbor Blvd  
Kissimmee, FL 34744  
Mailing Address Same

2. Principal Place of Business 21 1843 Harbor Blvd  
22 Suite, Apt. #, etc.  
23 City & State Kissimmee FL  
24 Zip 34744 25 Country Osceola

2a. Mailing Address 26  
27 Suite, Apt. #, etc.  
28 City & State  
29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report  
4. FEI Number 592345311 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  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name Thomas E. White  
82 Street Address (P.O. Box Number is Not Acceptable) 1843 Harbor Blvd  
83  
84 City Kissimmee FL 85 34744

11. Pursuant to the provisions of Sections 607.002 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 605.05, Florida Statutes.

SIGNATURE

Signature of principal place of business agent, if applicable

(NOTE: Registered Agent Signature required when first starting)

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	Robert W. White	1333 Aventura Way	FL	<input type="checkbox"/>
	Thomas E. White	1843 Harbor Blvd	Kissimmee FL	<input type="checkbox"/>
	Perile White	Spencer Shores	Haines City FL 33894	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	Change	Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	Change	Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	Change	Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	Change	Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	Change	Addition

900001892519  
-07/12/96--01067--029  
\*\*\*225.00

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addendum.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas E. White

6-28-96  
402 847 3900