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 Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90064 029 ***150.00

D	OCL	JMI	ENT	#	G91	31	4
							

1. Corporation Name

R&RJE	et tech, inc										
	•					l					
	•].					
Principal Place	of Business	Mailing Address					(722000 2010 1210)	•	,		
C/O RAYMOND J. BASHA C/O RAYMOND J. BASHA											
2811 EVANS ST 2811 EVANS ST							DO NOT WRI	TE IN THIS	SPACE		
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020				Date Incorporated or Qualified				TE NY TING	THIS GF AGE		
						3.	03/14/1984				
Principal Place of Business 2a. Mailing Address						4.	FEI Number		Apı	plied For	
26				59			59-2415695			Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5.	Certifcate of Status Desired		\$8.75 A	- (
City & State		City & State				6	Election Campaign Financing		\$5.00	May Ro	
23	·	28					Trust Fund Contribution		Added to		
Zíp 24	Country Zip 25 29 30			8. This corporation owes the corporation of the corporation owes the corporation of the c				urrent year Intangible			
	9. Name and Address of Curre		\Box			10.	Name and Address of New	Registered	Agent		
			81	Name						Ì	
	LSON, GRAFTON N. E OAKLAND PARK BLVD		82	Street A	Addres	ss (P	O. Box Number is Not Accept	able)			
STE 200			83								
	AUDERDALE FL 33334										
	"		84	City				FL	85 Zip C	Code	
11. Pursuant i	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes, the	abov	e-named	согрог	ration	submits this statement for the	purpose of	changing its	registered	
office or re	egistered agent, or both, in the State	of Florida. Such change was authoriations of, Section 607.0505, Florida S	zea by	tne corpo	oration	i's bo	oard of directors. I hereby acce	pt the appor	ntment as rec	gisterea	
SIGNATURE										[
	Signature, typed or printed name of registered age			nt signature re	v beniupe			DATE	ID DIDECTO	DC (N 42	
12.	OFFICERS AF		1 Tm =	····			ADDITIONS/CHANGES TO OF	FICERS AN	☐ Change	Addition	
TITLE			1.1 TITLE		ı.						
NAME	BASHA, SOUAD		2 NAME						}		
STREET ADDRESS	2811 EVANS ST			TADDRESS						1	
CITY-ST-ZIP	HOLLYWOOD FL		4 CITY-S	T-ZIP					Change	☐ Addition	
TITLE	P.		1 TITLE						□ change		
NAME	BASH, R 2811 EVANS ST		2 NAME							[
STREET ADDRESS	HOLLYWOOD FL 33020	1	3 STREE . 4 CITY-	TADDRESS						_	
CITY-ST-ZIP	TIOLETWOOD TE GOOLD		1 TITLE	31- <u>21</u> -					☐ Change	☐ Addition	
NAME :		3.	2 NAME							1	
STREET ADDRESS		3	3 STREE	T ADDRESS							
CITY-ST-ZIP			4. CITY-	ST-ZIP							
TITLE		_	1 TITLE						☐ Change	Addition	
NAME	,	The state of the s	2 NAME							}	
STREET ADDRESS	1			TADDRESS							
CITY-ST-ZIP	<u> </u>		4 CITY-5	ST-ZIP					Change	Addition	
TITLE	,		1 TITLE 2 NAME)					□ 2.m.3e		
NAME				T ADDRESS .						-	
STREET ADDRESS			4 CITY-9	i					•		
CITY-ST-ZIP	<u> </u>		1 TITLE						[Change	☐ Addition	

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 suppliemental 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 with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR