

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H84105

(6)

1. Corporation Name

RJL INVESTMENTS, INC.



Principal Place of Business

14995 GULF BLVD.
STE. D
MADEIRA BCH. FL 33708
US

Mailing Address

14995 GULF BLVD.
STE. D
MADEIRA BCH. FL 33708
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

BROWN, LESLIE S
14995 GULF BLVD., STE. D
MADEIRA BCH FL 33708

3. Date Incorporated or Qualified
10/30/1985

3a. Date of Last Report
05/01/1995

4. FCI Number
59-2035300

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

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 607.0502, Florida Statutes.

SIGNATURE

Signature of the person or persons who prepared this report

Signature of the person or persons who prepared this report

DATE

12. OFFICERS AND DIRECTORS

TITLE	DST	DELETE
NAME	MILLER, RONNIE H.	
STREET ADDRESS	14995 GULF BLVD., STE. D	
CITY-STATE-ZIP	MADEIRA BEACH FL	
TITLE	DP	DELETE
NAME	BROWN, LESLIE S.	
STREET ADDRESS	14995 GULF BLVD., STE. D	
CITY-STATE-ZIP	MADEIRA BEACH FL	
TITLE	DV	DELETE
NAME	PASCIA, JAMES T.	
STREET ADDRESS	14995 GULF BLVD., STE D	
CITY-STATE-ZIP	MADEIRA BEACH FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN #2

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

Leslie Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-96 (813) 391-9444

CR2E034 (12/95)