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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1, Corporation Name
S S & J, INC.



H86888

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(5)

of corporations Sec

FILED Mar 09 1998 8:00am Secretary of State

S S & J	I, INC.										
Principal Place	of Business	Mailing Address) (900:01) (10) (0) (0) (0) (10) (10) (10)	H 4104 0191	I MIBIL BINIL AID		
% ROBERT BURKHARDT 550-9 WELLS RD		% ROBERT BURKHARDT 550-9 WELLS RD				DO NOT WOLL	- 11. 71.110	CDACE			
ORANGE PARI	K FL 32073	ORANGE PARK FL	ORANGE PARK FL 32073				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified				
2 Principal Pt	aco of Business	2a. Mailing Addres	is	- · · · · -			11/21/1985 4. FEI Number		A	pplied For	
21	goo or oddinoss	26	-				59-2603978			ot Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.				S8.75 Additions			Additional		
2		27				5. Certificate of Status Desired		Fee R	equired		
City & State)	City & State					6. Election Campaign Financing		\$5.00	May Be	
23		[28]					Trust Fund Contribution			to Fees	
Zip Country		ļī	Zip				8. This corporation owes or has paid the current year intangible				
24	25	29	30				Personal Property Tax due Jun- 10. Name and Address of New R			No	
	9, Name and Address of Curre	nt Registered Agent		B1	Name		IV. Hame and Address of New 11	gistored	rigoni		
	RKHARDT, ROBERT			82							
	+9 WELLS RD					Addres	ss (P.O. Box Number is Not Accepta	ble)			
OH	ANGE PARK FL 32073			83							
				84	City			Fi	85 Zip	Code	
office or re	to the provisions of Sections 607 05/ egistered agent, or both, in the State in familiar with, and accept the oblig	e of Honda, Such chance	e was aumord	รคต ท	tine cor	d corpo poratio	ration submits this statement for the in's board of directors. I hereby acce	ри ине ар	of changing pointment as	its registered s registered	
	Signation lyped or protect name of recordered as				nt signatur	e required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE OF DC AN	ID DIRECTO	DC IN 12	
12.		VD DIRECTORS DEH	1:	3. TITLE			ADDITIONS/CHANGES TO OFF	CERS AN	☐ Change		
TITLE NAME	PD Burkhardt, Robert	المام الم		NAME						_	
STREET ADDRESS	279 CANDLER CT.				ADDRESS	1					
CITY ST-ZIP	GREEN COVE SPRING FL			CITY-		1					
TITLE	VD	DEL		TITLE		†			Change	Addition	
NAME	BURKHARDT, SHEILIA			NAME							
STREET ADDRESS	279 CANDLER CT.		2.3	STREE	ADDRESS						
CITY-ST-ZIP	GREENCOVE SPRINGS FL				OT TIO						
TITLE			2.	4 CITY -	21-58.	1					
		DEL		4 CHY-	51 - £\$P.				Change	Addition	
NAME		DEL	ETE 3.		51 - Zfr.				Change	Addition	
STREET ADDRESS		DEL	ETE 3.:	1 TITLE 2 NAME	ADDRESS				Change	Addition	
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4. I hereby certify that the information supplied with this filling 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.

SIGNATURE: Robert Burkford

ROBERT BURKHARDT 3.3.98 904-2695116