## 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

## DOCUMENT # **L77866**

1. Corporation Name

ROJAC ENTERPRISES, INC.

Principal Place	of Business	Мғ	ailing Address					1 (65)1611		.,	
7800 W OAKLAND PARK BOULEVARD 7800 W OAKLAND PARK BOU					ILEVARD						
BUILDING G BUILDING G											
SUNRISE FL 33351 SUNRISE FL 33351								DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualifed 06/05/1990			
2. Principal Pl	ace of Business .	Mailing Address					4. FEI Number		App	olied For	
21			26					59-1860556			Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired [		\$8.75 A	
City & State			City & State					6. Election Campaign Financing	<del></del>	\$5.00 N	May Be
23			28					Trust Fund Contribution	_	Added to	
Zip Country			Zip Country				8. This corporation owes the current	year Inta	ngible		
24	25	29		30				Personal Property Tax.			□No
· <b>-</b>	9. Name and Address of Current		tered Agent		T			10. Name and Address of New Reg	istered A	gent	
					81	Name	)	•			
LAPII	erre, rejean					<u> </u>		(D.O. D. Al. has in Net Acceptable	<del></del>		<del></del>
7800 W OAKLAND PARK BOULEVARD					82 Street Address (P.O			s (P.O. Box Number is Not Acceptable	"		}
BUILDING G						83			****		
SUNI	RISE FL 33351									T - 1 - 21 - 2	
					84	City			FL	85 Zip C	ode
office or re agent. I as	egistered agent, or both, in the State α n familiar with, and accept the obligat	of Florid ions of,	da. Such change was , Section 607.0505, F	authorize Iorida Sta	ed by atutes	tne con	ooration	ation submits this statement for the pu s board of directors. I hereby accept the chen reinstating)	ne appoin	tment as reg	istered
	Signature, typed or printed name of registered agen OFFICERS AN		** <del></del>	13		ii signature	riequiseo w	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12
12.	PSD OFFICERS AN	DUIKE	DELETE	_	TITLE		Т	ADDITIONS/GITANGES TO GITTE	LINO AIN	Change	Addition
TITLE	JACQUES, ROGER		E beerie	1	NAME						_
NAME	7800 W OAKLAND PK BLV #G					ADDRESS	,				į
STREET ADDRESS	SUNRISE FL 33331						<b>'</b>				
C/TY-ST-Z/P			☐ DELETE	_	CITY-S	I-ZIP	+	A CONTRACTOR OF THE PROPERTY O		Change	Addition
TITLE	TD		L3 VELETE	L.	TITLE					+g-	
NAME	LAPIERRE, REJEAN				NAME	<b></b>			٠,		
STREET ADDRESS	7800 W OAKLAND PK BLV #G			2.3	STREET	ADDRESS	<b>`</b>		•		}
CITY-ST-ZIP	SUNRISE FL 33331				CITY-5	it-ZIP	-	The state of the s		. Change	Addition
TITLE	رة يك سيد الاراسي	•	· · · · □·DELETE		TITLE -					· — overige	
NAME					NAME						
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CITY-ST-ZIP					CITY-5	iT- ZIP				Change	Addition
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NAME					NAME						
STREET ADDRESS	•			. I		ADDRES	8		•		
CITY-ST-ZIP				_	CITY+S	T-ZIP	+			Change	☐ Addition
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NAME				ŀ	NAME						
STREET ADDRESS				- 1		TADDRES	5				
CITY-ST-ZIP					CITY-S	I-ZIP	_			Change	Addition
TITLE			☐ DELETE	I	TITLE					☐ Change	
NAME	,				NAME						
STREET ADDRESS	•					TADDRES	S	•			
CITY-ST-ZIP	·			6.4	CITY-S	T-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 supplemental annual report is frue 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 explowered 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 autachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE OF SIGNING OFFICER OR DIRECTOR

1/7/95 Date

954-749-8802-

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90087 027 \*\*\*150.00

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