

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
CORPORATION DIVISION  
1901 N. W. 13th Street  
Tallahassee, Florida 32310-0001

**APPROVED  
AND  
FILED**

**DOCUMENT # P92000013177 (0)**

**BRJ, INC.**

MAY 19 9:32  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Principal Office of Registrant: P.O. BOX 320757  
COCOA BEACH FL 32932-0757  
Mailing Address: P.O. BOX 320757  
COCOA BEACH FL 32932-0757

2. Date of Incorporation		28. Mailing Address		3. Date of Incorporation / Qualified		3a. Date of Last Report	
21		26		12/21/1992		05/01/1994	
4. FID Number		5. Certificate of Status Desired		Applied For		Not Applicable	
59-3165441		<input type="checkbox"/>		<input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution		7. This information has not ability for interstate tax purposes		8. Florida Statutes		\$5.00 May Be Added to Fees	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PEEPLS, JAMES W III 402 HIGH PT DR COCOA FL 32926				81 Name			
				82 Street Address - P.O. Box Number if Not Applicable			
				83			
				84 City			
				FL 85 Zip Code			

11. I, the undersigned, being a resident of this State in 1994, being Florida Statutes, do hereby certify that the above information is true and correct and that the same was authorized by the corporation's board of directors, if any, or by the majority in control of the corporation, as required by Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. ADDITIONS CHANGED OR DELETED TO REGISTERED AGENTS		13. ADDITIONS CHANGED OR DELETED TO REGISTERED AGENTS	
PSTD SWANN, JIM 402 HIGH POINT DRIVE COCOA FL		AS PEEPLS, JAMES W. III 505 N. ORLANDO AVENUE COCOA BEACH, FL 32931	
<input type="checkbox"/> Change <input type="checkbox"/> Address		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Address	
<input type="checkbox"/> Change <input type="checkbox"/> Address		<input type="checkbox"/> Change <input type="checkbox"/> Address	
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<input type="checkbox"/> Change <input type="checkbox"/> Address		<input type="checkbox"/> Change <input type="checkbox"/> Address	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.01, Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and correct and that my separate shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or its successor or former responsible for making the report as required by Florida Statutes, and that my name appears on Block 12 or Block 13 of this report or is attached thereto with an address.

**SIGNATURE:**  
  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**JAMES W. PEEPLES III**

5/2/95  
407-783-2218