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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000019791 (0)

S.F.J., INC.

Mailing Address

FILED Feb 27 1998 8:00am Secretary of State



Principal Place of Business 3001 49TH ST. N 3001 49TH ST. N. ST PETERSBURG FL 33713 ST PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/10/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3236135 26 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHRADER, PAUL 5972 5TH AVE. S. 82 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33707 83 84 City 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 Horida. 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 607.0505, Florida Statutes. SIGNATURE Signature, by ed or printed name of registerest agent and title if applicable (NCITE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE SCHADER, PAUL NAME 1.2 NAME 5972 5TH AVE. S. 1.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33707 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **GREEN, PATRICK** NAME 2.2 NAME 7321 CENTAL AVE APT 701 STREET ADDRESS 2.3 STREET ADDRESS ST PETERSBURG FL 33710 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME MOBAYED, SAMI 3.2 NAME 2495 37 AVE NORTH STREET ADDRESS 3.3 STREET ADDRESS ST PETERSBURG FL 33713 CITY-ST-ZIP 3.4. CITY-ST-ZIP DEL ETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP Change Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 61 THLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 of 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 an appearance of the corporation an appearance of the corporation of the receiver of the corporation an appearance of the corporation of the receiver of th

SIGNATURE:

1-15-98

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