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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000074213 (7)

RRJ ENTERPRISES INC.

Principal Place of Business	Mailing Address			
935 BAREFOOT BLVD SUITE #1 MICCO FL 32976	835 BAREFOOT BLVD., SUITE #1 MICCO FL 32976			

## **FILED** Mar 05 1998 8:00am Secretary of State



MICCO FL 32	976		O FL 32976	90(1E #1					
MICOC 1 E 02070		miyo	MICOCO LE CEUTO			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						10/10/1994			
	2. Principal Place of Business 2a. Mailing Address					4. FEI Number	A	oplied For	
21		26				65-0525039	No.	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			ite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional	
22		27	. 0 0					equired	
City & State	}	<u> </u>	y & State			6. Election Campaign Financing		May Be	
Zip	Country	28 Zip		Count	<del></del>	· <del></del>		to Fees	
24	25	29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30,			
27	9. Name and Address of Cur		d Agent	1301		10. Name and Address of New Regi			
RAHMAN, M. HUHIBUR  81 Name									
3300 WEDGEWOOD DRIVE N.E., #107									
PALM BAY FL 32905			8:	Street Ad	dress (P.O. Box Number is Not Acceptable	)	•		
174	an entite deduc	•		8:	3				
				84	City		FL 85 Zip	Code	
11. Pursuant to	o the provisions of Sections 607.	0502 and 607.1 ate of Florida. S	508, Florida <b>Stat</b> ute Such change was a	es, the aborauthorized b	/e-named co ov the corpora	rporation submits this statement for the pur ation's board of directors. I hereby accept	nose of changing it	ls registered	
agent. I ar	n familiar with, and accept the ob	oligations of, Se	ction 607. <b>0</b> 5 <b>05, Fl</b> o	orida Statute	s.	•			
SIGNATURE									
12.	Signature, typed or printed name of registered	AND DIRECTOR	<u>`</u>	13.	jent signature req	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	0.140	
TITLE	P	AND DIVECTOR	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition	
NAME	AHMED, BABUL			1.2 NAME					
STREET ADDRESS	3300 WEDGEWOOD DR. N	I.E., APT, 207	•		T ADDRESS				
CITY+ST-ZIP	PALM BAY FL 32905			1.4 CITY-				[!	
TITLE	V	•	DELETE	2.1 TITLE	31-21		☐ Change	Addition	
NAME	RAHMAN, M. MUHIBUR			2.2 NAME					
STREET ADDRESS	3300 WEDGEWOOD DR. N	I.E., APT, 107	•		T ADDRESS				
CITY-ST-ZIP	PALM BAY FL 32905			2. 4 CITY					
TITLE	8		DELETE	3.1 TITLE	01 211		☐ Change	☐ Addition	
NAME	RAHMAN, FATIMA			3.2 NAME					
STREET ADDRESS	1627 FALMOUTH AVENUE				T ADDRESS				
CiTY-ST-ZIP	NEW HYDE PARK NY 1104			3.4. City					
TITLE			DELETE	4.1 TITLE			☐ Change	☐ Addition	
NAME				4. 2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				4.4 CITY-					
TITLE			DELETE	5.1 TITLE	· · ·		☐ Change	Addition	
NAME				5.2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				5.4 CITY-					
TITLE			☐ DELETE	6.1 TITLE			Change	Addition	
NAME			_	6.2 NAME					
STREET ADDRESS					T ADDRESS				
OTHER PROPERTY				U.S STREE	HIDDRESS				

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 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.

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