

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000081839 (0)

1. Corporation Name

BRJ ENTERPRISES, INC.

Principal Place of Business

12 LAREDO PLACE
DAVE FL 33324

Mailing Address

12 LAREDO PLACE
DAVE FL 33324



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

11/08/1994

3a. Date of Last Report

08/14/1995

4. FEI Number

65-0533804

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SAKANO, UBIRAJARA S
4153 SW 47 AVE. BAY 167
DAVE FL 33314

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 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 Florida. 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

UBIRAJARA S. SAKANO -- SAME AS ABOVE

12. OFFICERS AND DIRECTORS

12.1 NAME
SAKANO, UBIRAJARA S
12.2 STREET ADDRESS
12 LAREDO PLACE
12.3 CITY-ST-ZIP
DAVE FL 33324

12.4 NAME
12.5 STREET ADDRESS
12.6 CITY-ST-ZIP

12.7 NAME
12.8 STREET ADDRESS
12.9 CITY-ST-ZIP

12.10 NAME
12.11 STREET ADDRESS
12.12 CITY-ST-ZIP

12.13 NAME
12.14 STREET ADDRESS
12.15 CITY-ST-ZIP

12.16 NAME
12.17 STREET ADDRESS
12.18 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME ☐ Change ☐ Addition

13.2 STREET ADDRESS ☐ Change ☐ Addition

13.3 CITY-ST-ZIP ☐ Change ☐ Addition

13.4 NAME ☐ Change ☐ Addition

13.5 STREET ADDRESS ☐ Change ☐ Addition

13.6 CITY-ST-ZIP ☐ Change ☐ Addition

13.7 NAME ☐ Change ☐ Addition

13.8 STREET ADDRESS ☐ Change ☐ Addition

13.9 CITY-ST-ZIP ☐ Change ☐ Addition

13.10 NAME ☐ Change ☐ Addition

13.11 STREET ADDRESS ☐ Change ☐ Addition

13.12 CITY-ST-ZIP ☐ Change ☐ Addition

13.13 NAME ☐ Change ☐ Addition

13.14 STREET ADDRESS ☐ Change ☐ Addition

13.15 CITY-ST-ZIP ☐ Change ☐ Addition

13.16 NAME ☐ Change ☐ Addition

13.17 STREET ADDRESS ☐ Change ☐ Addition

13.18 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

UBIRAJARA S. SAKANO
PRES.

7/30/96 (954) 3270342

CR2E034 (7/96)