FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 4:40

DOCUMENT # **P94000083574 (1)**

1. Corporation Name
R.J. MANUFACTURING, INC.

Principal Place of Business	Mailing Address
2990 S.W. 60TH AVE. FT. LAUDERDALE FL 33314-1809	2990 S.W. 60TH AVE. FT. LAUDERDALE FL 33314-1809

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/10/1994
3a. Date of Last Report:

2. Principal Place of Business — 21: 4450 S.W. 61ST. AVE
22 Suite, Apt. #, etc.:
23 City & State: DAVIE FL
24 Zip: 33314
25 Country: BROWARD

2a. Mailing Address — 26:
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip:
30 Country:

4. FEI Number: 65-0530976 ☐ 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

SEXTON, RAYMOND J
2990 S.W. 60TH AVE.
FT. LAUDERDALE FL 33314-1809

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: Raymond J Sexton — 3-9-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRES.	11 TITLE	☐ Change ☐ Addition
NAME	RAY SEXTON	12 NAME	
STREET ADDRESS	2990 S.W. 60 AVE	13 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL. 33314	14 CITY-ST-ZIP	
TITLE	VIC-PRES.	21 TITLE	☐ Change ☐ Addition
NAME	STEVE SEXTON	22 NAME	
STREET ADDRESS	4673 S.W. 24 ST.	23 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL. 33317	24 CITY-ST-ZIP	
TITLE	TRES/SECRY	31 TITLE	☐ Change ☐ Addition
NAME	SHIRLEY M. SEXTON	32 NAME	
STREET ADDRESS	2990 SW 60 AVE	33 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL. 33314	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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)(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.

SIGNATURE: Raymond J Sexton — 3-9-95 (305) 581-1118
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED BY CORPORATION OFFICER OR DIRECTOR — Date — (Daytime Phone #)

000276 CP