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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000015316 (9)

JRJ ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2309 COUNTRYSIDE DR. SPRING HILL FL 34806	2309 COUNTRYSIDE DR. SPRING HILL FL 34606-3617 US

FILED Mar 26 1998 8:00am Secretary of State



2309 COUNTRYSIDE DR. SPRING HILL FL 34606		2309 COUNTRYSIDE DR. SPRING HILL FL 34606-3	2309 COUNTRYSIDE DR. SPRING HILL FL 34606-3617						
		US			DO NOT WRITE IN THIS	SPACE			
					3. Date Incorporated or Qualified 02/23/1995				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ar	Applied For		
21		26			59-3303774		ot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		•			Additional		
22 City & State	^	27			5. Certificate of Status Desired	Fee Re	equired		
23		City & State			Election Cempaign Financing Trust Fund Contribution		May Be to Fees		
Zip	Country	Zip	Cour	itry	8. This corporation owes or has paid the co	urrent year in	tangible		
24	25	29	30		Personal Property Tax due June 30. 🗹 Yes 🔲 No				
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
	rden, rosemarie			B1 Name					
2309 COUNTRYSIDE DRIVE SPRING HILL FL 34606			-	82 Street Address (P.O. Box Number is Not Acceptable)					
GIT	MIO HILL PE STOOD		į.	B3					
			- -	B4 City	Fi	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 Signature, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12		
TITLE	D	DELETE	1.1 100	.E		Change	☐ Addition		
NAME	HARDEN, JOHN P JR.		1.2 NA	AE		_			
STREET ADDRESS	2722 PENZANCE STREET		1.3 STB	EET ADDRESS	•				
CITY-ST-ZIP	PALM HARBOR FL	·		r-ST-ZIP	•				
TITLE	D	☐ DELETE	2.1 1111			Change	Addition		
NAME	HARDEN, ROSEMARIE		2.2 NA	AE I			_		
STREET ADDRESS	2309 COUNTRYSIDE DR.			EET ADDRESS	in the second se				
CITY-ST-ZIP	SPRING HILL FL 34606			Y-ST-ZIP	•				
TITLE	D	DELETE	3.1 TITL			Change	Addition		
NAME	HARDEN, JOHN P SR.		3.2 NAM	I					
STREET ADORESS	2309 COUNTRYSIDE DR.			EET ADDRESS					
CITY-ST-ZIP	SPRING HILL FL 34606								
TITLE	OF THIRD THEE I E OTOGO	☐ DELETE	4.1 TITL	Y-ST-ZIP		Change	Addition		
NAME		- Decere	4. 2 NA				radiioti		
STREET ADDRESS			I	EET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
TITLE		DELETE	5.1 TITL			Change	Addition		
NAME			5.2 NAM	- I		vialige	La radiiidii		
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITL	(-ST-ZIP		Change	Addition		
i i			- 6	i i		Unange	LI KOOIIIOSI		
NAME DYDEET ADDRESS			6.2 NAA						
STREET ADDRESS				EET ADDRESS			ŀ		
CITY-ST-ZIP			6.4 CIT	r-ST-ZIP					

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 an attachment with an address.

(352)