

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

FILED

Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000036385 (9)**

1. Corporation Name

RDJ INDUSTRIES, INC.

Principal Place of Business

**2185 JAMES DR
ST CLOUD FL 34771**

Mailing Address

**2185 JAMES DR
ST CLOUD FL 34771**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/09/1995

4. FEI Number

59-3317469

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

**DIAZ DE ARCE, DAVID R
2185 JAMES DR
ST CLOUD FL 34771**

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

Signature, typed or printed name of the registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	DIAZ DE ARCE, DAVID R	
STREET ADDRESS	2185 JAMES DR	
CITY-ST-ZIP	ST CLOUD FL 34771	

TITLE	D	<input type="checkbox"/> DELETE
NAME	DIAZ DE ARCE, JUNE A	
STREET ADDRESS	2185 JAMES DR	
CITY-ST-ZIP	ST CLOUD FL 34771	

TITLE	DV	<input type="checkbox"/> DELETE
NAME	BRUNS, ALLAN	
STREET ADDRESS	17801 BONNIE VISTA CT	
CITY-ST-ZIP	WINTER GARDENS FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	BRUNS, KAREN	
STREET ADDRESS	17801 BONNIE VISTA CT	
CITY-ST-ZIP	WINTER GARDEN FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	SPAULDING, KEN C	
STREET ADDRESS	1800 MICHIGAN AVE	
CITY-ST-ZIP	ST CLOUD FL	

TITLE	DP	<input type="checkbox"/> DELETE
NAME	DIAZ DE ARCE, DAVID R	
STREET ADDRESS	2185 JAMES DR	
CITY-ST-ZIP	ST CLOUD FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

SIGNATURE:

David R. Diaz de Arce

1-5-98

407-882-1338

CR034 (10/97)