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** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** P95000051386 (7) R/J COMMERCIAL VENTURES INC. Principal Place of Business Mailing Address 15281 WILSHIRE COURT 15281 WILSHIRE COURT PEMBROKE PINES FL 33027 PEMBROKE PINES FL 33027 3. Date Incorporated or Qualified 3a, Date of Last Report 06/29/1995 Principal Place of Business Mailing Address **FEI Number** Applied For 21 26 650600 4 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees ZiD Country Country 8. This corporation has liability for intangible tax under s 199.032
Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SOLOMON, JACK **15281 WILSHIRE COURT** Street Address (P.O. Box Number is Not Acceptable) 82 PEMBROKE PINES FL 33027 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)TiTLE DELETE 1.1 DILE Change Add-tion NAME SOLOMON, ROBERTA 1.2 NAME CR2E034 STREET ADDRESS 15281 WILSHIRE COURT 13 STREET ADDRESS CITY-ST-2IP PEMBROKE PINES FL 33027 14 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2 2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TiTLE Change Addition NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 City - ST - ZiP TITLE DELETE 5.1 TiTLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 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)(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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 13 if changed, or on an attachment with an address

**SIGNATURE:** 

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JULY 9,1996 9544366593