## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Scoretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000059936	(1)
Corporation Name		` '

RJB & SON, INC.

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Maibou Address



Principa! Place o	of Business	Mai:ng Address				
2395 TALLAHA FORT LAUDER	ASSEE RDALE FL 33326	2395 TALLAHASSEE FORT LAUDERDALE FL 3	3326			
				3. Date incorporated or Qualified 08/03/1995	3a. Date of Last Repo	
2. Principal Plac	ce of Business	2a. Mailing Address	V 00 0 10	4. FE! Number	h	led For
1321	South 30 Ave	26 1321 SOJ	Ih 30 flve,	65-0653491		Applicable
Suite, Apt. #,	, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 A	quired
City & State	lywood, FL	City & State  28 HOlly Wood	, FL	Election Campaign Financing     Trust Fund Contribution	55.00 s	Fees
Zip 33	020 25 Cóuntry SA		Country 30 USF	8. This corporation has liability for in Florida Statutes Yes	<b>⊠</b> No	9.032,
	9. Name and Address of Current	Registered Agent	81 Name,	10. Name and Address of New R		
343 ALM	V FIRM OF LAWRENCE J SPIEG ERIA AVENUE BABLES FL 33134	EL CHRTD	Helle	r & Barnett Corpo ess. IP.O. Box Number Is Nat Acceptab N. University		?\$
			84 City Pla	antation	FL 85 33	<i>ጜ</i> ⋥⋥
11. Pursuant to or registere	the provisions of Sections 607.0502 of age or both, in the State of Florid	and 607.1508, Florida Statutes, a. Such change was authorized	the above-named corpor by the corporation's boar	ation submits this statement for the pured of directors. Thereby accept the appe	pose of changing its regi pintment as registered ag	stered office ent. I am
SIGNATURE /	/ //			151DEN T	4/29/9	6
		nd tilk if applicacie. (NOTE)  DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS	IN 12
TITLE	PSTD	☐ DELETE	1. 1 TITLE		Change [	Addition
NAME.	HOFFMAN, STEVEN H		1.2 NAME			
STREET ADDRESS	2395 TALLAHASSEE		1.3 STREET ADDRESS			
CITY-ST-ZiP	FORT LAUDERDALE FL 33320	3	1.4 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	3. 1 TITLE		Change [	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3. STREET ADDRESS			
CITY - ST - ZIP		POLICE	3.4 CITY-ST-7/P		☐ Change [	Addition
TITLE		DELETE	4. 1 1BLE		□ cuanhe [	AOUILIOII
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP		(T) DELETE	4.4 CITY-ST-7IP		Change [	Addition
TITLE		TI DELETE	5 1 TITLE		change [	
NAME.			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-SY-ZIP		□ DELETE	5.4 CITY - ST - ZIP 6. 1 TITLE		Change [	Addition
TITLE		T Deterit			€1 Augusto	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CHY-ST-ZIP	continues that the information supplied	with this films is voluntarial furnish	ed and does not qualify f	for the exemption stated in Section 119	.07(3)(k), Florida Statutes	. I further
certify that		ial report or supplementa: <b>ann</b> ua ration or the receiver or tr <b>uste</b> e (	i report is true and accura empowered to execute thi	ate and that my signature shall have the is report as required by Chapter 607, Fl		

SIGNATURE: Standarure AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR H. HOffman 4/29/96 954-927-0076