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Feb 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000097291 (5)

1. Corporation Name
S&J CONSULTING CORP.

Principal Place of Business
200 EAST LAS OLAS BLVD. STE 1800
FORT LAUDERDALE FL 33301

Mailing Address
200 EAST LAS OLAS BLVD. STE 1800
FORT LAUDERDALE FL 33301-2248



2. Principal Place of Business

21 3696 ULMERTON RD

2a. Mailing Address

26 3696 ULMERTON RD

Suite, Apt. #, etc

22 CLEARWATER

Suite, Apt. #, etc.

27 CLEARWATER FL

City & State

23 FL

City & State

28 CLEARWATER FL

Zip

24 34622

Country

25 USA

Zip

29 34622

Country

30 USA

3. Date Incorporated or Qualified

12/20/1995

3a. Date of Last Report

04/08/1996

4. FEI Number

65-0633883

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

BRINKLEY, W M
200 EAST LAS OLAS BLVD. STE 1800
FORT LAUDERDALE FL 33301

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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME SMITH, RUSSELL K
STREET ADDRESS 200 EAST LAS OLAS BLVD. STE 1800
CITY - ST - ZIP FORT LAUDERDALE FL 33301

TITLE VP ☐ DELETE

NAME STEVENS, JAMES S
STREET ADDRESS 200 EAST LAS OLAS BLVD. STE 1800
CITY - ST - ZIP FORT LAUDERDALE FL 33301

TITLE STD ☐ DELETE

NAME SMITH, ANDREW R
STREET ADDRESS 200 EAST LAS OLAS BLVD. STE 1800
CITY - ST - ZIP FORT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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 do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-97

813-571-1177

Date

Daytime Phone #

CR2E034 (9/96)