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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P96000043787 (6)

RJL GROUP, INC.

Principal Place of Business	Mailing Address		
1404 NORTH LAKE WAY	POST OFFICE BOX 295		
DAILU DEACH EL 93490	DALLE DEACH OF SOAGO		

FILED Jul 02 1998 8:00am Secretary of State



PALM BEACH FL 33480 PALM BEACH FL 33480				DO NOT WRITE IN THIS SPACE						
j								3. Date Incorporated or Qualified		
								05/22/1996		
2. Principal P	lac e o f Busi	noss	2a. Maili	ng Address				4. FEI Number Applied For		
21			26					65-0668835 Not Applicable		
Suite, Apt. #, etc. Surte, Apt. #, etc.						SR 75 Additional				
27							5. Certificate of Status Desired Fee Required			
City & State City & State						6. Election Campaign Financing \$5.00 May Be				
23			28					Trust Fund Contribution Added to Fees		
Zip		Country	Zip		Cou	intry	•	8. This corporation owes or has paid the current year Intangible		
24		25	29		30			Personal Property Tax due June 30. 🔀 Yes 🔲 No		
		and Address of Current	Hegistered	Agent				10. Name and Address of New Registered Agent		
	AMERILAWYER CHARTERED						81 Name			
	343 AÜMERIA AVENUE					82 Street Address (P.O. Box Number is Not Acceptable)				
CO	ral Gabl	ES FL 33134								
						83				
						84	City	85 Zip Code		
11. Pursuant	to the provis	ions of Sections 607.0502	and 607.150	08, Florida Statut	les, the al	bove	-named	d corporation submits this statement for the purpose of changing its registered progration's board of directors. I hereby accept the appointment as registered		
agent la	m fam iliar wi	ith, and accept the obligat	ions of, Sect	ion 607.0505, FI	aumonze orida Stat	a by lutes	r trie cor S.	reportation's board of directors. I hereby accept the appointment as registered		
SIGNATURE										
	Signature, typied	or printed name of registered agent			£ Registere	d Age	nt signature	re required when reinstating) DATE		
12.	##-	OFFICERS AND	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD			☐ DEFETE	1.1 30	TLE		Change Addition		
NAME		o, robertjohn jr.			1.2 N/	AME				
STREET ADDRESS		ORTH LAKE WAY			1.3 Si	ree i	ADDRESS			
CITY-ST-ZIP		EACH FL 33480			1.4 01	1Y-S	1 - 71P			
TITLE	V\$ D			DELETE	2111	TLE		☐ Change ☐ Addition		
NAME		o, robert J Dr., sr		•	2.2 N/	AME				
STREET ADDRESS		ORTH LAKE WAY			23 ST	REET	ADDRESS			
CITY-ST-ZIP	PALM B	EACH FL 33480			240	ITY-S	IT-ZIP			
TITLE				DELETE	3 1 TI	TLE		Change Addition		
NAME					3 2 N/	AME				
STREET ADDRESS					3.3 \$1	REET	ADDRESS			
CITY-ST-ZIP					3.4. CI	ITY - S	T- 71P			
TITLE	·			DELETE	4.1 1 1			Change Addition		
NAME					4. 2 N	AME				
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP	•				4.4 CI					
TITLE				DELETE	5.1 TII			☐ Change ☐ Addition		
NAME					5 2 NA					
STREET ADDRESS							ADDRESS ;]		
CITY-ST-ZIP	1				5.4 Ci					
TITLE	+			DELETE	5.4 UI		- LIF	☐ Change ☐ Addition		
NAME					6.2 NA					
STREET ADDRESS							ADDOCCO			
							ADDRESS			
14. I hereby o	ertify that the	information supplied with	this filma dr	pes not qualify fo	6.4 CII or the exe	mnt	ion state	led in Section 119.07(3)(i), Florida Statutes. I further certify that the information		
indicated	on this annu	al report or supplemental	annual repor	t is true and acc	urate and	tha	l my sig	gnature shall have the same logal effect as if made under oath; that I am an		
Block 12 c	ore cto r of the or B ioc k 13 if	e corporation of the receiv changed, or on an attact	rer on trusteer involves with ar	empowered 17 (execute	nis	eport as	gnature shall have the same logal effect as if made under oath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in		
		/ ///		7/	///					