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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600053279 (1)

A. J., INC.

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Principal Place of Business

FILED
Apr 28 1998 8:00am
Secretary of State

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2851 SE OCEAN BLVD STUART FL 34998		2851 SE OCEAN BLVD STUART FL 34996		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 06/20/1996	Br AOL	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0687032	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu		
24	25		30		Yes No	
	9. Name and Address of Currer	N Registered Agent	81 Name	10. Name and Address of New Registered	Agent	
	INELLI, JOSEPH		81 Name			
	S1 SE OCEAN BLVD		82 Street A	ddress (P.O. Box Number is Not Acceptable)	*	
SII	UART FL 34996					
			83			
			84 City		85 Zip Code	
				FL.	.	
office or r agent. I a SIGNATURE	no familiar with, and accept the oblig	of Florida Such change was actions of Section 607.0505, Flor	thorized by the corporate to the corpora	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the approximation $4/2/99$	pointment as registered	
	storellure, typed or printed name of registered ago	of and title if Application (NOTE:	Registered Agent signature r		· · · · · · · · · · · · · · · · · · ·	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	• • •	L DELETE	1.1 TITLE		Change Addition	
NAME	IANNELLI, JOSEPH		1.2 NAME			
STREET ADDRESS	2851 SE OCEAN BLVD		1.3 STREET ADDRESS			
CITY-ST-ZIP	STUART FL 34996		1.4 CITY - ST - ZIP			
TITLE	SID	DELETE	2.1 TITLE		Change Addition	
NAME	IANNELLI, ELIZABETH A		2.2 NAME			
STREET ADDRESS	2851 SE OCEAN BLVD		2.3 STREET ADDRESS			
CITY-ST-ZIP	STUART FL 34996		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			3.4. CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CiTY-ST-ZIP			
TITLE		DELETE	51 TITLE		Change Addition	
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby o	ertify that the information supplied w	ith this filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further ce	ertify that the Information	
officer or a	on this annual report or supplementa director of the corporation or the reco or Block 13 if changed, or on an attac	siver or trustee empowered to ex	rate and that my sign xecute this report as r	ature shall have the same legal effect as if made un required by Chapter 607, Florida Statutes; and that r	der oath; that I am an my name appears in	

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