## 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 # P96000092470 (9)

SJR INTERNATIONAL CORP.

## FILED Feb 06 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		
531 NORTH OCEAN BLVD., SUITE 1802	531 NORTH OCEAN BLVD		
POMPANO BEACH FL 33062	POMPANO BEACH FL 33062		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			01/01/1997
2. Principal Place of Business	2a. Mailing Address	.~~	4. FEI Number Applied For
27 4846 N. UNIVERSITY DR	26 4846 N. UNI	VERSITY	VIC. 65-0707232 Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired \$8.75 Additional
P2 102	27 # 102 City & State		Fee Required
City & State  23 LAUDERHILL, FL	28 LAUDERHILL	- FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zio Country	7ip	Country	This corporation owes or has paid the current year Intangible
24 33351 25 USA	29 33351 30	יות לי אווי	Personal Property Tax due June 30. Yes No
9, Name and Address of Curren		,, , , , , , , , , , , , , , , , , , , ,	10. Name and Address of New Registered Agent
AMERILAWYER CHARTERED		81 Name	9
343 ALMERIA AVENUE		82 Street	t Address (P.O. Box Number is Not Acceptable)
CORAL GABLES FL 33134		GE Street	A Address (1.10. Box Indiriber is indi Acceptable)
		83	
		84 City	les Tip Code
		84 City	FL 65 Zip Code
SIGNATURE LOVE			d corporation submits this statement for the purpose of changing its registered provided in the purpose of changing its registered provided when registering (27, 98) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
Signature sport or pointed family registered ag-		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PSTD	DELETE	1.1 THLE	PIZES IDENT Change Addition
NAME RAYBIN, SCOTT W		12 NAME	M ON BIN SCOTT W
STREET ADDRESS 531 NORTH OCEAN BLVD., S	UITE 1802	1.3 STREET ADDRESS	4846 'N. UNIVERSITY DR. #102
CHTY-ST-ZIP POMPANO BEACH FL 33062		1.4 CITY-ST-ZIP	LAUDERITILL, FL 33351
TITLE	DELETE	2 1 TITLE	VICE PRESIDENT Change PAddition
NAME		2 2 NAME	RICHMAN, GUY 4846 N. UNIVERSITY DR. #102
STREET ADDRESS		2.3 STREET ADDRESS	4846 N. UNIVERSITY DR. 4102
CITY-ST-ZIP		2 4 CHTY-ST-ZIP	LAUDERIHILL FL 33351
TITLE	☐ DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
City-St-Zip		3.4 CITY-S1-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	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP	DUETE	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	400002425200 hange Addition -02/10/9801016020 05
NAME		6.2 NAME	# # # # # # # # # # # # # # # # # # #
STREET ADDRESS		6.3 STREET ADDRESS	7.h
CITY-ST-ZIP	ith this filing does not qualify for the	64 CITY-S1-7IP	ted in Section 119 07/3Vi). Florida Statutes I further certify that the information

i. I hereby certify that the information supplied with his filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of supplemental arrival 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 octporation 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 chalged, or on an attachment with an address.

CHATURE MOT ON

8 (4.4) 270. 977