Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90149 037 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P96000099926

R.J.O. INC.							 	41 81 411 91 11 3 1 1				
Principal Place of Business			Mailing Address				. 1 (88)(88) (58 184) 8 11(1 88)(1 88)	., 68111 66118 18		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •	
2800 NE 28TH STREET			2800 NE 28TH STREET									
#4 #4			•	,			DO NOT WRITE IN THIS SPACE					
LIGHTHOUSE POINT FL 33064 LIGHTHOUSE POINT FL 33064							3. Date Incorporated or Qualifed					1
}							12/09/1996					
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applie			d For]	
21			26				65-0714880	65-0714880 Not Ap]
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Add		
			7				3.			Requi		4
City & State			City & State				=e=Election:Cempaign:Financing≤			00-Ma		┝
23			Zip Cour				Trust Fund Contribution Added to Fees					1
Zip	——————————————————————————————————————				y		8. This corporation owes the current year Intangible Personal Property Tax.					1
24 25			29 30				<u> </u>	Personal Property Tax. L Yes ANO O. Name and Address of New Registered Agent				
Name and Address of Current Registered Agent					1	Name	10. Mainte and Address of Main	ogiotoroa y	9			1
LYNCH, J. DAVID				82	1		(D.O. Boy Number is Not Accepts	blo)				-
224 COMMERCIAL BLVD						Sireet Addre	Iress (P.O. Box Number is Not Acceptable)					
SUITE 310												
LAUDERDALE-BY-THE-SEA FL 33308						City			85 2	Zip Cod	le	1
					4	-		FL.		·		╛
! office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Flori	ida. Such change was auth	onzea o	yι	-named corpo he corporation	ration submits this statement for the 's board of directors. I hereby accep	purpose of c t the appoint	hanging iment a	its reg s regist	jistered tered	
SIGNATURE							The second state of the se	DATE				
Olympia Principle					ent	signature required	ADDITIONS/CHANGES TO OFF		DIREC	CTORS	IN 12	1
TITLE	D OFFICERS AN						ADDITIONO/OF ARTOLO TO OFF	TOLINO AITE	Char		Addition	1
NAME	OBERER, RONALD J MR						•					1
STREET ADDRESS 2800 NE 28TH STREET, #4				1.3 STREI	TREET ADDRESS							H
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064				1.4 CITY-	4 CITY-ST-ZIP				_] }
TITLE .			☐ DELETE	2.1 TITLE					Char	ige	Addition Addition	['
NAME				2.2 NAME								
STREET ADDRESS				2.3 STRE	ET/	ADDRESS						\
CITY-ST-ZIP				2. 4 CITY-	_	r-ZIP			ET Cho		Addition	4
#INE ====		⊽ -	DELETE	.3.1.TITLE		₹# #			Char	ige	Addition	<u>.</u>
NAME	, ,			3.2 NAMÉ				•				
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP			☐ DELETE	3.4. CITY- 4.1 TITLE	_	-∠IP			[] Char	nge	Addition	1
TITLE NAME			_ beerie	4. 2 NAME						-	_	ĺ
STREET ADDRESS						ADDRESS						}
CITY-ST-ZIP				4.4 CITY-								
	i				_					. –		1

CITY-ST-ZIP 14. I 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 change for or an attachment with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

☐ DELETE

☐ DELETE

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

Change

Addition

☐ Addition