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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000101245 (4)

SBJ COMMUNICATIONS, INC.

FILED Apr 17 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address									T DODITED THE INDICATE STATE OF USE SEATON OF THE SEATON O		ATI 0111 1001	
1717 STAYSAIL DRIVE 1717 STAYSAIL DRIVE VALRICO FL 33594 VALRICO FL 33594									DO NOT WRITE IN TH	HIS SPACE		
									3. Date Incorporated or Qualified			
2. Principal Place of Business 2s. Mailing Address									12/13/1996 4. FEI Number			
2. Principal Place of Business				26 1717 Staysail Dr.					T PPROS (V			
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				-	59-3426021		Additional	
22				27					5. Certificate of Status Desired		lequired	
City & State				City & State					6. Election Campaign Financing		May Be	
Zip Country			28					Trust Fund Contribution		I to Fees		
Zip 24	`			Zip I		Country			8. This corporation owes or has paid the		itangible ☐ No	
25 25 Name and Address of Curre			of Current Regi						Personal Property Tax due June 30. Yes No			
Od Alassa									10. Italia and Addition of How Hogiston	ou rigoni		
SHERMAN, STUART L 1717 S TAYSAIL DRIVE						82	Ctroot	Addros	ss (P.O. Box Number is Not Acceptable)			
VALRICO FL 33594							30000	Addies	ss (F.O. Box Nothbell Is Not Acceptable)			
						83						
						84	City			85 Zip	Code	
11. Pursuant	to the provis	ions of Section	s 607.0502 and	607.1508. Florid	ia Statutes, th	e above	e-named	corpor			its registered	
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, Spired or prelied name to registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE												
12. OFFICERS AND DIRECTOR					13.				ADDITIONS/CHANGES TO OFFICERS.		RS IN 12	
TITLE	D			☐ DE	LETE 1	.1 TITLE				☐ Change	Addition	
NAME	SHERMA	IN, STUART	L		1	2 NAME						
STREET ADDRESS		aysail driv	E		1	.3 STAEET	ADDRESS					
CITY-ST-ZIP) FL 33594				.4 CITY-S	T-ZIP	ļ		——————————————————————————————————————		
TITLE	D			☐ DE		1 TITLE				L Change	☐ Addition	
NAME		IN, BRIAN M				2 NAME						
STREET ADDRESS	1 1 1 1 1 1 1	PRVETTE DR					ADDRESS					
CITY-ST-ZIP TITLE		FL 33624		DE		. 4 CITY-S	ST-ZIP	15		Change	Addition	
NAME	D ADDIE	JEFFREY A				2 NAME		JEA	fiven Apple	Continge	L Addition	
STREET ADDRESS			PLACE CIR	#211			ADDRESS		S BARCELONA DR #916			
CITY-ST-ZIP		FL 33624	T LAUL OIL S	FZ11	- I	.4. CITY - S			mpa, Fi 33614			
TITLE	(Cin) O I	L 00027		☐ DE		.1 TITLE) - EH	1111	11pc. , 16 336 14	Change	Addition	
NAME					4	. 2 NAME				•		
STREET ADDRESS					4	.3 STREET	ADDRESS				1	
CITY-ST-ZIP						.4 CITY - S						
TITLE				☐ DE	LETE 5	.1 TITLE				☐ Change	Addition	
NAME					5	.2 NAME						
STREET ADDRESS					5	.3 STREET	ADDRESS					
CITY-ST-ZIP						4 CITY-S	T-ZIP	<u> </u>				
TITLE				☐ DE	LETE 6	.1 TITLE				Change	Addition	
NAME					6	.2 NAME						
STREET ADDRESS					6	3 STAEET	address					
CITY-ST-ZIP					6	4 CITY-S	1-7IP	<u> </u>				

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 changed, or on an attachment with an address.