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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000017079 (9)

FILED May 07 1998 8:00am Secretary of State

W J R VENTURE, INC. Principal Place of Business Mailing Address 169 TEQUESTA DRIVE 12 E 169 TEQUESTA DRIVE 12 E **TEOUESTA FL 33469 TEOUESTA FL 33469** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/24/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0728994 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zφ Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BURCKART, WILLIAM E 169 TEQUESTA DRIVE 12 E 82 Street Address (P.O. Box Number is Not Acceptable) **TEQUESTA FL 33469** 83 84 City 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** (NOTE Registered Agent signature required when reinstating Signature, typed or printed name of registered agent and little if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1 1 TITLE NAME BURCKART, WILLIAM E 1.2 NAME **169 TEQUESTA DRIVE 12 E** STREET ADDRESS 1.3 STREET ADDRESS **TEQUESTA FL 33469** CITY-ST-ZIP 1.4 CITY - ST - ZIP THIS CORPORATION IS TITLE 21 TITLE Change Addition NAME 2.2 NAME IN PROCESS OF BEING STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP DISSOLUEN 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TATLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Channe TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETÉ Change Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADORESS CITY - ST - ZIP

14. Thereby 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 chapter 607 or on an attachment with an address

SIGNATURE:

William E.

4-27-98 561-575-5400

CR2E034 (10/97