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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # ,P9700053869 (8)

DJR ENTERPRISES, INC.

Principal Place of Business

2225 SOUTH VOLUSIA AVE ORANGE CITY FL 32763 Mailing Address

2225 SOUTH VOLUSIA AVE ORANGE CITY FL 32763

## FILED Jul 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

					06/15/1997		
2. Principal P.	Place of Business	2a. Mailing Address 26			4. FEI Number 345 7063	Ap	plied For Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 A	Additional
City & State City & State					6. Election Campaign Financing	\$5.00	<del></del>
3		28			Trust Fund Contribution	Added to	
Zip 4	Country 25	Zip	Country 30	у	This corporation owes or has paid the currer     Personal Property Tax due June 30.	· —	angible No
<u>- 1 </u>	9. Name and Address of Curren	1 1	1001		10. Name and Address of New Registered Ag		
ATCHLEY, LOUIS D 2225 <b>S</b> OUTH VOLUSIA AVE				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
ORANGE CITY FL 32763				63			
			83	1			
			84	City		<b>85</b> Zip C	Code
1 Purcuant I	to the provisions of Spotons 607 05.0	2 and 607 1508 Florida Sta	atutae tha abou	n named core	poration submits this statement for the purpose of ch	i	
office or re	egistered agent, or both, in the State	of Florida. Such change wa	as authorized b	v the corpora	tion's board of directors. I hereby accept the appoin	ianging its itment as	registered
agent. I ar	rn <b>fam</b> iliar with, and accept the obliga	ations of, Section 607.0505,	, Florida Statute	S.	, , , , , , , , , , , , , , , , , , , ,		•
IGNATURE	Signature, typed or printed name of registered age	or and tilled applicable (II)	NOTE: Registered Ag	out signature rook i	ired when reinstating) DATE		
2.	OFFICERS AND	<del> </del>	13.	unt signature redoi	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTOR:	S IN 12
TLE	D	DELETE	1.1 TITLE			Change	Additio
AME	ATCHLEY, LOUIS D		1.2 NAME			•	• •
REET ADORESS	401 E GRAVES AVE		1.3 STREET	ADDRESS			
ITY-\$T-ZIP	ORANGE CITY FL 32763		1.4 CITY- 5	I			
ITLE	D	☐ DELETE	2 1 TITLE		L.	Change	Additio
AME ,	RUPP, ROBERT C		2.2 NAME				
FREET ADDRESS	1433 PEACHFIELD DRIVE		23 STREET	ADDRESS			
TY-ST-ZIP	VALRICO FL 33594		2 4 DITY-	ST-ZIP			
TLE	D	☐ DELETE	3.1 TITLE			] Change	Additio
AME	RUPP, JOHNNIE K		3 2 NAME				
REET ADDRESS	1861 MARYSVILLE DRIVE		3.3 STREET	ADDRESS			
TY-ST-ZIP	DELTONA FL 32725	DELETE	3 4. CITY-	ST-ZIP		1.0	1 4 4 100
TLE		L_1 Dett 16	41 TITLE		· <b>L</b>	Change	Additio
AME			4. 2 NAME				
REET ADDRESS				ADDRESS			
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AME		beech	5.2 NAME	İ		, onange	AGONIO
REET ADDRESS			5.3 STREFT	ADDRESS			
TY-ST-ZIP			5.4 CITY-S	1			
ILE		DELETE	61 TITLE			Change	Addition
AME			6.2 NAME	İ	_	•	
TREET ADDRESS			6.3 STREET	ADDRESS			
ITY-ST-ZIP	_		6.4 C/TY - S	ST - ZIP			
1. I hereby c	ertify that the information supplied wi	ith this filing does not qualif	v for the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I further certify	y that the i	information
indicated of officer or of	on this annual report or supplementa	l annual report is true and a siver or trustee empowered	accurate and th	at my signatu	Section 119.07(3)(i), Florida Statutes. I further certifure shall have the same legal effect as if made under uired by Chapter 607, Florida Statutes; and that my	r	oath: that