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 # P97000072392 (8)

TRI-J ENTERPRISES, INC.

Principal Place of Business		Mailing Address	Mailing Address			1 (001(40) (10 12))) (50)) 20)) (50)) (50)) (50)	
647 PINE RANCH EAST RD 547 PINE RA OSPREY FL 34275 OSPREY FL 3			ANCH EAST RD 34275			DO NOT WRITE IN THIS SP.	ACE
						3. Date Incorporated or Qualified	
						08/20/1997	
2. Principal P	2a. Mailing Address	Mailing Address			4. FEI Number	Applied For	
21		26	26			65-0183570	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	6	City & State	<u></u>			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip		ountry		8. This corporation owes or has paid the curren	t year Intangible
24	25	25 29 30			Personal Property Tax due June 30. 🔲 Yes 💟 No		Yes 🖳 No
9. Name and Address of Current Registered Agent						Name and Address of New Registered Ag	ent
O'REILLY, KATHERINE C				81	Name		
547 PINE RANCH EAST RD OSPREY FL 34275			•	82	32 Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85 Zip Code
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the ob	ate of Florida. Such change v	vas authori.	zed by	the corporati	oration submits this statement for the purpose of chion's board of directors. I hereby accept the appoin	nanging its registered Ilment as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Rogist	ered Age	nt signature require	ed when reinslating) DATE	
12. OFFICERS AND DIRECTORS				3.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	D DELETE 1.		1 TITLE			Change Addition	
NAME	O'REILLY, ROBERT C		1.3	1.2 NAME			
STREET ADDRESS 547 PINE RANCH EAST RD			11	1.3 STREET ADDRESS			
CITY-ST-ZIP OSPREY FL 34275				1.4 CITY - ST - ZIP			
CHT-ST-ZIP	ON HET TE UTETO	DELETE		1 3/1/15	- 20'	·	Channe Addition

2.2 NAME

3.1 TITLE

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

DELETE

DELETE

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

3.4. CITY-ST-ZIP

2.4 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 changed, or on an attachment with an address.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

TITLE

NAME

TITLE NAME

Robert Mestle

41.9.00

R2F034 (10/97)

Addition

Addition

Addition

Addition

Change

Change

Change

Change

FILED

May 01 1998 8:00am

Secretary of State