

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Jan 26, 2001 8:00 am**  
**Secretary of State**

01-26-2001 90136 008 \*\*\*158.75

**DOCUMENT # P98000073873**

1. Entity Name

**ROJUS ENTERPRISES, INC.**

Principal Place of Business

**8532 139 LANE NORTH  
SEMINOLE FL 33776-2916**

Mailing Address

**8532 139 LANE NORTH  
SEMINOLE FL 33776-2916**

2. Principal Place of Business

**4181 MORENO DRIVE**

3. Mailing Address

**4181 MORENO DRIVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

**PALM HARBOR, FL**

City &amp; State

**PALM HARBOR, FL**

Zip

**34685-3642**

Country

**USA**

Zip

**34685-3642**

Country

**USA**

4. FEI Number

**59-3528852**

Applied For

Not Applicable

5. Certificate of Status Desired

☒**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**PITTS, RON  
8532 139TH LANE NORTH  
SEMINOLE FL 33776-2916**

7. Name and Address of New Registered Agent

Name

**PITTS, RON**

Street Address (P.O. Box Number is Not Acceptable)

**4181 MORENO DRIVE**

City

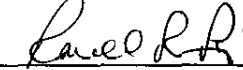
**PALM HARBOR,****FL**

Zip Code

**34685-3642**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

**RONALD R. PITTS PRESIDENT****1/14/01**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution.**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

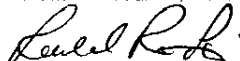
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
PITTS, RONALD R  
8532 139 LANE NORTH  
SEMINOLE FL 33776-2916**☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**4181 MORENO DRIVE  
PALM HARBOR, FL 34685-3642**☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**RONALD R. PITTS****1/14/01****727-938-5542**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)