**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT #** P98000092293 1. Corporation Name

RRJ, INC.

## FILED Sep 17, 1999 8:00 am Secretary of State

09-17-1999 90011 040 \*\*\*550.00



						A 18118 11018 11019 10100 1111 1001
Principal Place of Business Mailing Address						
5534 COGNAC DRIVE 5534 COGNAC DRIVE FT. MYERS FL 33919 FT. MYERS FL 33919						
F1. MIENS FL 33919					DO NOT WRITE IN THIS SPACE	
1					3. Date Incorporated or Qualified	- J. 110E
					10/28/1998	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26				65-0873545	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					1 20 10 10	\$8.75 Additional
22 27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	Ŋ	8. This corporation owes the current year _	
24	25	29	30		Intangible Personal Property.	Yes No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered	Agent
DI 11	DIN IFFFBEV		8	1 Name		
RUBIN, JEFFREY				2 Street Addr	ress (P.O. Box Number is Not Acceptable)	-
5534 COGNAC DRIVE FT. MYERS FL 33919			. L			
			8:			
			84	1	FL	85 Zip Code
l office or	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida. Such change was a ligations of, section 607.0505, Florida.	authorized b orida Statute	by the corporations.	oration submits this statement for the purpose of chion's board of directors. I hereby accept the appoint	ntment as registered
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	T. 00 0 .h.	O DOUGHE O		T		Change Addition
NAME	Johney Kupin	^ · · · · · · · · · · · · · · · · · · ·	1.2 NAME	:		<u> </u>
STREET ADDRESS	2524 Opghac 1	unie _	1.3 STREE	ET ADDRESS		
CITY-ST-ZIP	F+My = FL	33919	1,4 CITY-5	ST-ZIP		
TITLE	0 1 1995	Delete V	2.1 TITLE			Change Addition
NAME ,	Kichard Kulgin N	1 ice president	2.2 NAME	<u>:</u>		
STREET ADDRESS	8614 Mandersta	nct	2.3 STREE	ET ADORESS		
CITY-ST-ZIP	FI-MUOR EI	33912	2.4 CITY-5	ST-ZIP		
TITLE	1 1 2 1 2	DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	<u> </u>		<del>-</del> —
STREET ADDRESS			3.3 STREE	ET ADDRESS		
CITY-ST-ZIP			3.4 CITY-5	ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME	:	,	<del>-</del>
STREET ADDRESS			4.3 STREE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		1
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME		,	
STREET ADDRESS			5.3 STREE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY-9	i		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAMÉ			
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP			6.4 CITY-S			

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.

SIGNATURE:

941-267-3888