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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S59113**

6650 W. INDIANTOWN RD.

SUITE 200

Supplier FL 33458

RFJ ENTERPRISES, INC.

| rincipal Place of Business Mailing Address | | | | | | - I FANTINIA INC NICE INTOLITANT PRANTICUM SENTENCE AND PRANTICUM SENTENCE SENTICE SENTICES. | | | | |
|---|-----------------|--|--------|---------|--|--|---------------------|--------------------------------|--|--|
| O COMMERCE WA A1 IPITER FL 33458. | | 106 COMMERCE Unit A1 Jupiter FL 3345 | | | | DO NOT WRITE IN T | HIS SPAC | DE | | |
| | | | | | | 3. Date Incorporated or Qualifed 06/12/1991 | | | | |
| . Principal Place | 2a. Mailing Add | ess | | | 4. FEI Number | Į | Applied For | | | |
| l . | | 26 | | | | 65-0267142 | | Not Applicable | | |
| Suite, Apt. #, et | cc. | Suite, Apt. # | , etc. | | | 5. Certificate of Status Desired | • • | 3.75 Additional ee Required | | |
| City & State | | City & State | · | | | 6. Election Campaign Financing Trust Fund Contribution | | 5.00 May Be | | |
| Zip ! | Country | Zip 29 | 30 | Country | | This corporation owes the current year Personal Property Tax. | r Intangibl ☐ Ye | | | |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | | | |
| | a, scott | | | 81 | Name Street Addi | ress (P.O. Box Number is Not Acceptable) | | | | |

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.

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City

| | | | | | | The first of the second | S. & St. 11. | |
|----------------|---|--------------------|-----------------------------|------------------------|-------------|-------------------------|--------------|----------------|
| SIGNATURE | Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Red | istered Agent signature rec | uired when reinstating | | DATE | · | · |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDIT | IONS/CHANGE | S TO OFFICERS A | ND DIRECTOR | RS IN 12 |
| TITLE | D | DELETE | 1.1 TITLE | | | | Change | ☐ Addition Ì |
| NAME | FORTUNATO, JOSEPH R | | 1.2 NAME | | | | | |
| STREET ADDRESS | 106 COMMERCE WAY #A1 | | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | JUPITER FL | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | VP 🗆 | DELETE | 2.1 TITLE | | | | Change | ☐ Addition |
| NAME | FORTUNATO, DIANNE S | | 2.2 NAME | | | | | ĺ |
| STREET ADDRESS | 106 COMMERCE WAY A-1 | | 2.3 STREET ADORESS | | | | | ļ |
| CITY-ST-ZIP | JUPITER FL | | 2. 4 CITY-ST-ZIP | | | | | |
| TITLE | | DELETE | 3.1 TIFLE | | | | Change | Addition |
| NAME | | | 3.2 NAME | | | | | 1 |
| STREET ADDRESS | والمستعود وجورات أيبيا إمراعوا المستعربين والمستعرب والمستعرب والمستعرب | عالمات ويعلم محالي | 3.3 STREET ADDRESS | **** | | - · · · | | Control of the |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | | | | | |
| πιE | | DELETE | 4.1 TITLE | | | | Change | Addition |
| NAME | | | 4.2 NAME | | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | | | |
| TITLE | | DELETE | 5,1 TITLE | | | | ☐ Change | ☐ Addition |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | | | | |
| TITLE | UI | DELETE | 6.1 TITLE | | | | ☐ Change | ☐ Addition |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6.4 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 supplied with an address, in the exemption stated in Section 1.19.07(5)(f), Fronta Statutes. In this first open the remaining open to the exemption of 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 attachaptent with an address, with all other like empowered.

SIGNATURE

Zip Code

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Apr 07, 1999 8:00 am ____ Secretary of State

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