FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 8:31

DOCUMENT # **S86870** **(0)**

1. Corporation Name

R.J.R. INVESTORS, INC.

Principal Place of Business	Mailing Address
1803 AUSTRALIAN AVE STE A WEST PALM BEACH FL 33409 US	1803 AUSTRALIAN AVE STE A WEST PALM BEACH FL 33409 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/14/1991
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21	26 5350 10th Avenue North
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 5
City & State 23	City & State 28 Lake Worth, FL
Zip / Country 24 / 25	Zip / Country 29 33463 / 30

4. FEI Number: 65-0297370 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WATSON, JAMES W 1803 AUSTRALIAN AVE., STE A SUITE 1003 WEST PALM BCH FL 33409	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 5350 10th Avenue North 83 Suite 5 84 City Lake Worth FL 85 Zip Code 33463

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.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DSTV	11 TITLE	☒ Change ☐ Addition
NAME	WATSON, JAMES W	12 NAME	
STREET ADDRESS	1803 AUSTRALIAN AVE., STE A	13 STREET ADDRESS	5350 10th Avenue North, Suite 5
CITY ST ZIP	WEST PALM BEACH FL	14 CITY ST ZIP	Lake Worth, FL 33463
TITLE	DP	21 TITLE	☒ Change ☐ Addition
NAME	THERIEN, RICHARD C.	22 NAME	
STREET ADDRESS	1803 AUSTRALIAN AVE, A	23 STREET ADDRESS	5350 10th Avenue North, Suite 5
CITY ST ZIP	WEST PALM BEACH FL	24 CITY ST ZIP	Lake Worth, FL 33463
TITLE	DST	31 TITLE	☒ Change ☐ Addition
NAME	WATSON, JAMES W.	32 NAME	
STREET ADDRESS	2000 PALM BCH LAKES BLVD	33 STREET ADDRESS	5350 10th Avenue North, Suite 5
CITY ST ZIP	WEST PALM BEACH FL	34 CITY ST ZIP	Lake Worth, FL 33463
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 of changed or on an attachment with an address.

SIGNATURE: Richard C. Therien 3/15/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date