8-13-9-SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Aug 13 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretar√ of State * 1997 DIVISION OF CORPORATIONS DOCUMENT # (3) RJM VENTURES, INC. Mailing Address Principal Place of Business 3801 SOUTH OCEAN BLVD. 3801 SOUTH OCEAN BLVD. HIGHLAND BEACH FL 33487 HIGHLAND BEACH FL 33487 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 04/06/1992 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0332785 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 Personal Property Tax due June 30. □ No 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JORDAN, DIANNE 150 E. PALMETTO PARK ROAD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 615 83 **BOCA RATON FL 33432** 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of it gistered agont and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addilion TITLE 1.1 TILLE CLANEY, KELVIN NAME 1.2/NAME 3801 S. OCEAN BLVD. STREET ADDRESS 1.3 STREET ADDRESS HIGHLAND BEACH FL CITY-ST-ZIP 1.4 CITY\ST-ZIP DELETE Change ■ Addition TITLE 2.1 TITLE MARNEY, ROBIN NAME 2.2 NAME 3801 S. OCEAN BLVD. STREET ADDRESS 2.3 STREET ADDRESS HIGHLAND BCH. FL CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELFTE Change Addition TITLE 3.1 1IILE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELETE Change Addition TITLE 5.1 TILLE NAME 5.2 NAME **53 STREFT ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP