## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P02000079079

Entity Name: ZAJO ENTERPRISES, INC.

FILED Nov 30, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

9109 PINEBREEZE DRIVE 15105 KESTRELRISE DR RIVERVIEW, FL 33569 LITHIA, FL 33547

Current Mailing Address: New Mailing Address:

9109 PINEBREEZE DRIVE 15105 KESTRELRISE DR RIVERVIEW, FL 33569 LITHIA, FL 33547

FEI Number: 36-4502835 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOTTLIEB, DAVID
9109 PINEBREEZE DRIVE
RIVERVIEW, FL 33569 US
GOTTLIEB, DAVID
15105 KESTRELRISE DR
LITHIA, FL 33547 US

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: DAVID GOTTLIEB 11/30/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

D ( ) Delete Title: MR (X) Change ( ) Addition

 Name:
 GOTTLIEB, DAVID
 Name:
 GOTTLIEB, DAVID

 Address:
 9109 PINEBREEZE DRIVE
 Address:
 15105 KESTRELRISE DR

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 LITHIA, FL 33547

Title: D ( ) Delete Title: MRS (X) Change ( ) Addition

Name:GOTTLIEB, REBECCA AName:GOTTLIEB, REBECCA AAddress:9109 PINEBREEZE DRIVEAddress:15105 KESTRELRISE DRCity-St-Zip:RIVERVIEW, FL 33569City-St-Zip:LITHIA, FL 33547

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID GOTTLIEB PRES 11/30/2004