

# 2002 UNIFORM BUSINESS REPORT (UBR)

0010614 AT

DOCUMENT # A98000001631

1. Entity Name

AJK FOX, LTD.

FILED

02 FEB 13 PM 3:30.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

11377 SW 84TH STREET, APT. 524  
MIAMI FL 33173

Mailing Address

11377 SW 84TH STREET, APT. 524  
MIAMI FL 33173

2. Principal Place of Business

11377 SW 84TH STREET

Suite, Apt. #, etc.

APT. 524

City & State

MIAMI, FL

Zip

33173

Country

USA

3. Mailing Address

11377 SW 84TH STREET

Suite, Apt. #, etc.

APT. 524

City & State

MIAMI, FL

Zip

33173

Country

USA

DUE BY MAY 1, 2002

4. FEI Number

65-0850494

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FEUERMAN, JONATHAN ESQ.  
C/O THERREL BAISDEN, P.A.  
ONE S.E. 3RD AVE., SUITE 2400  
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

\$1,699,653.04

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P98000058969  
NAME KRISTI INVESTMENT GROUP, INC.  
STREET ADDRESS 11377 SW 84TH STREET, APT. 524  
CITY-ST-ZIP MIAMI FL 33173

DOCUMENT #  
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STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Alice E. Fox ALICE E. FOX

2/4/2002

305-595-3085

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)