

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90098 021 ***150.00

DOCUMENT # S57318

1. Entity Name
A.J.H. INVESTMENTS, INC.



Principal Place of Business

% DAVID R. HURST
2656 ELECTRONICS WAY
WEST PALM BEACH FL 33407

Mailing Address

% DAVID R. HURST
2656 ELECTRONICS WAY
WEST PALM BEACH FL 33407

2. Principal Place of Business

c/o DOUGLAS E. PEREBOOM

3. Mailing Address

c/o DOUGLAS E. PEREBOOM

Suite, Apt. #, etc.

Suite, Apt. #, etc.

470 COLUMBIA DR. SUITE D-201

470 COLUMBIA DR. SUITE D-201

City & State

City & State

WEST PALM BEACH, FL

WEST PALM BEACH, FL

Zip

Country

Zip

Country

33409

USA

33409

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PEREBOOM, DOUGLAS E

470 COLUMBIA DRIVE

SUITE D-201

WEST PALM BEACH FL 33409

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DPT	<input type="checkbox"/> Delete
NAME	HURST, ANDREW J.	
STREET ADDRESS	% 69 CURLEW RD.	
CITY-ST-ZIP	MANALAPAN FL	
TITLE	VS	<input type="checkbox"/> Delete
NAME	HURST, DAVID R.	
STREET ADDRESS	69 CURLEW RD	
CITY-ST-ZIP	MANALAPAN FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	c/o 470 COLUMBIA DRIVE. SUITE D.201
CITY-ST-ZIP	WEST PALM BEACH FL 33409
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	c/o 470 COLUMBIA DRIVE. SUITE D.201
CITY-ST-ZIP	WEST PALM BEACH FL 33409
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
ANDREW J. HURST

2/7/03

705-635-2924

Date

Daytime Phone #

CR2E034 (10/02)