2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000087934

Entity Name: AJAD, INC

Current Principal Place of Business:

2090 NW 115 STREET MIAMI, FL 33167

Current Mailing Address:

2090 NW 115 STREET MIAMI, FL 33167 US

FEI Number: 38-3931989

Name and Address of Current Registered Agent:

LATTERY, DWAYNE 2090 NW 115 STREET MIAMI, FL 33167 US

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | PRESIDENT | Title | DIRECTOR |
|-----------------|--------------------|-----------------|---------------------|
| Name | LATTERY, DWAYNE | Name | LATTERY, ANGENIKA L |
| Address | 2090 NW 115 STREET | Address | 2090 NW 115 STREET |
| City-State-Zip: | MIAMI FL 33167 | City-State-Zip: | MIAMI FL 33167 |
| Title | ASSISTANT DIRECTOR | Title | ASSISTANT DIRECTOR |
| Name | LATTERY, JANAE A | Name | LATTERY, AKILAH |
| Address | 2090 NW 115 STREET | Address | 2090 NW 115 STREET |
| City-State-Zip: | MIAMI FL 33167 | City-State-Zip: | MIAMI FL 33167 |
| Title | ASSISTANT DIRECTOR | | |
| Name | LATTERY, D'NYA A | | |
| Address | 2090 NW 115 STREET | | |
| City-State-Zip: | MIAMI FL 33167 | | |

I hereby 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 all other like empowered.

SIGNATURE: DWAYNE LATTERY

PRESIDENT

03/31/2015

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 31, 2015 Secretary of State CC9714441521

Date