

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000040025

**Entity Name:** AJ SUMMERS, INC.

**Current Principal Place of Business:**

75 N WOODWARD AVE #86007  
C/O ASTRA  
TALLAHASSEE, FL 32313

**FILED**  
**Feb 26, 2017**  
**Secretary of State**  
**CC7895377486**

**Current Mailing Address:**

75 N WOODWARD AVE #86007  
C/O ASTRA  
TALLAHASSEE, FL 32313 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

FUNK, VLADLENA  
75 N WOODWARD AVE #86007  
C/O ASTRA  
TALLAHASSEE, FL 32313 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name PRAVDA, MARIA  
Address 75 N WOODWARD AVE., #86007  
City-State-Zip: TALLAHASSEE FL 32313

Title VD  
Name FUNK, VLADLENA  
Address 75 N WOODWARD AVE #86007 C/O  
ASTRA  
City-State-Zip: TALLAHASSEE FL 32313

*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: VLADLENA FUNK**

**S**

**02/26/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date