## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 07, 2007 08:00 AM DOCUMENT # G00458 **Secretary of State** 1. Entity Namo AJAY-USA, INC. Principal Place of Business Mailing Address 3500 DANBY COURT ORLANDO FL 32812 3500 DANBY COURT ORLANDO FL 32812 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-2227703 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Cortificate of Status Dosirod Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SNYDERBURN, PHILIP J Street Address (P.O. Box Number is Not Acceptable) 319 PARK LAKE CIR ORLANDO FL 32803 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 r applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE ☐ Delete TITLE ☐ Change Addition FOUCAULT, ARTHUR J' NAME NAME 3500 DANBY COURT STREET ADDRESS SIREE I ADDRESS ORLANDO FL 32812-6034 CITY-SI-7/P CITY-ST-ZIP STD HLE ☐ Delete THIE □ Change ☐ Addition FOUCAULT, ARTHUR J NAME NAME U00000658472 3500 DANBY COURT STREET ADDRESS STREET ADDRESS 03/15/07-80039-022 158.75 ORLANDO FL 32812-6034 CITY ST-7IP CITY-SI-7IP MD Detete IIIIE Addition Change FOUCAULT, MICHAEL D NAME NAME 3500 DANBY COURT STREET ADORESS STREET ADDRESS ORLANDO FL 32812-6034 CITY-ST-ZIP CITY - ST - ZiP ☐ Delete MIL ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE Delete Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - ST- ZIP I heroby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 eath; 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.

ARTHUR J. Foresay

SIGNATURE:

FILED