

J31629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

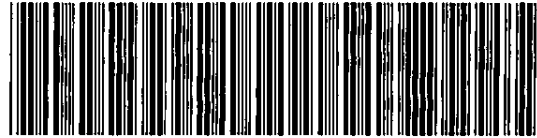
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B.A.

TB

MAY 17 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AJAY ENTERPRISES, INC.  
Name of Corporation

**DOCUMENT NUMBER:** J31629

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORMAN REISCH  
Name of Contact Person

AJAY ENTERPRISES, INC.  
Firm/Company

20533 Biscayne Blvd. #325  
Address

AVENTURA, FL 33180  
City/State and Zip Code

NREISCH@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORMAN REISCH at 305 . 974 . 0616  
Name of Contact Person Area Code & Daytime Telephone Number  
305 . 974 . 0562

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: A.J.A.V. ENTERPRISES, INC.
2. The principal office address: 20533 Biscayne Blvd. #325  
AVENTURA, FL 33180
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 9/3/1986 Document number: J31629
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ANN REISCH  
20191 EAST COUNTRY CLUB Dr. #905  
AVENTURA, FL 33180

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NORMAN REISCH  
20191 EAST COUNTRY CLUB Dr. #905  
AVENTURA, FL 33180

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Ann Reisch  
Signature of an officer or director

Ann Reisch owner/President  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]  
Signature of Registered Agent

7th of May, 2010  
Date

If signing on behalf of an entity:

NORMAN REISCH  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA