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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # N9600

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AJENE ENTERPRISES INC.

SIGNATURE:

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SECRETARY OF STATE TALLAHASSEE FLORIDA



Principal Place of Business Mailing Address				- I NODINION DYA 92195 BUSH [*] #ÅFIN ZONN PONYE ERAN DONDO HURO HIND JONG ADIN 92001			
4495 SHELFER RD J80 4495 SHELFER RD J80 TALLAHASSEE FL 32310-7124							
					3. Date Incorporated or Qualified 06/26/1996	3a. Date of Las	t Report
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	-1	Applied For
TO Box 235		16 P.O. BOX	1105	f	59-3430772		Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		-	5. Certificate of Status Desired		5 Additional Regulred
City & State		City & State	<u></u>		6. Election Campaign Financing		0 May Be
3		o lalamosee			Trust Fund Contribution		ed to Fees
Ζιρ 4 25	Country	a32302	Countr))	8. This corporation has liability for Florida Statutes	intangible tax unde ☐ Yes ☐ No	er s. 199.032,
	Address of Current Re		1-1	4.)	10. Name and Address of New Re		
			61	Name			
CRUMP, BENJAMIN L			82	Street Add	ress (P.O. Box Number is Not Acceptal	ple)	·
521 E. TENNESSEE ST	ı		Ĺ				
TALLAHASSEE FL 32308			83	i			
			B4	City		85 Z	ip Code
						FL	·
 Pursuant to the provisions office or registered agent. 	of Sections 617.0502 an or both, in the State of F	id 617.1508, Florida Statu Torida, Such change was	utes, the abov s authorized b	re-named cor by the corpora	poration submits this statement for the pation's board of directors. I hereby acce	purpose of changin pt the appointment	g its registere as registered
agent. I am familiar with, a	nd accept the obligation	ns of, Section 617.0503, F	Florida Statute	s.	•		•
SIGNATURE	nled name of registered agent and	4 Kila il andicable (Alf	OTE: Desiration of An	and algorithms and	Hed when reinstating)	DATE	
Signature, typelo or pri	OFFICERS AND DI		13.	ent aignature requ	ADDITIONS/CHANGES TO OFFI		ORS IN 12
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