AMENDED

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

04-21-2003 91213 043 ****61.25
FILED P00000095428

03 MAY -2 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11005236

DOCUMENT # P00000095428

1. Entity Name
A+J SUBACHAN INVESTMENTS, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
380 S. FED HWY	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DANIA, FL	City & State
Zip: 33004 Country: USA	Zip Country

4. FEI Number 65-1127917 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: BATALLAS, WILLIAM H
Street Address (P.O. Box Number is Not Acceptable): 3531 GRIFFIN RD
City: FT LAUD FL Zip Code: 33312

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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	TITLE	
NAME	JUDY SUBACHAN	NAME	
STREET ADDRESS	380 S. FED HWY	STREET ADDRESS	
CITY-ST-ZIP	DANIA, FL 33004	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Judy Subachan (PRESIDENT) 4/17/03 (954) 921-6577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #