


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 NOV -9 PM 12:19

DOCUMENT # P01000037529

1. Entity Name
AMAJOGI INTERNATIONAL, INC.



REINSTATEMENT 04

Principal Place of Business
**1203 LAKEPOINTE LANE
PLANTATION, FL 33322**

Mailing Address
**1203 LAKEPOINTE LANE
PLANTATION, FL 33322**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country



09012004 Chg-P CR2E034 (10/03)

4. FEI Number
65-1095989

Applied For
☐ Not Applicable

6. Name and Address of Current Registered Agent
**CHOL, RUDY
1203 LAKEPOINTE LANE
PLANTATION, FL 33322**

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

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHOI, RUDY JOHANNES MUNGRATRAAT 17 PARAMARIBO SURINAME SA, <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rudy Choi **9/17/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**Amajogi International, Inc
1203 Lakepointe Lane
Plantation, FL 33322
(954) 649-3820**

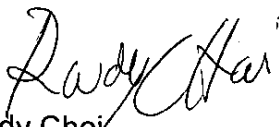
Date: 10/15/04

To: Florida Department of State

**Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314**

I am very sorry for the seemingly delayed response to your Annual Report. I had sent check # 1076 for \$150.00 drawn on Union Planters Bank on April 30, 2004 for the Annual Report Filing fee. It seems as if this check has either not been received or deposited by your establishment as yet. However, i already put a stop payment on that check and am now resending you another one to replace it. Again, please accept my apologies for the delayed response due to difficulty in accessing my mail since the recent hurricanes and being away . I hope you can forgive me for this.

Thanks in Advance


**Rudy Choi
President
Amajogi International
(954) 649-3820**