2004 FOR PROFIT CORPORATION

Aug 04, 2004 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P02000034143** AJ PROPERTIES & INVESTMENTS INC. Principal Place of Business Mailing Address 12113 CANCUN DRIVE 12113 CANCUN DRIVE JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225 CR2E034 (10/03) 07272004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3638498 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAVIS, JOHN DO NOT WRITE 12113 CANCUN DRIVE JACKSONVILLE, FL 32225 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or buth, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent standure required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution, Added to Fees Due by September 5, 2004 OFFICERS AND DIRECTORS 18. PD सरस DAVIS, JOHN NAME 12113 CANCUN DRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32225 U00000153367 TELLE VPD 08/04/04-80004-023 150.00 NAME DAVIS, AVIA 12113 CANCUN DRIVE STREET ADDRESS CATY - ST- ZIP JACKSONVILLE, FL 32225 3551E NAME STREET ADDRESS DO NOT WRITE CRY-ST-78P IN THIS SPACE TITLE NAME STREET ASDRESS CRY-57-ZIP MASSE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this tiling does not quality 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 curporation 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: _

TITLE NAME STREET ADDRESS

> ·aws SIGNATURE AND THEED OR PRINTED NAME OF GIGNING OFFICER OR DIRECTOR

FILED