020006250

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(City/State/Zip/Phone #)	
(Business Entity Name)	12/16/0501045804 **35
(Document Number)	
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TO: Amendment Section
Division of Corporations
SUBJECT: ARTICLES OF DISSOLUTION
DOCUMENT NUMBER: P02000062502
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SHAUKAT ALI
(Name of Contact Person)
AJAZ INC.
(Firm/Company)
8161 S.W., 24TH COURT, BLDG # 9,APT # 402
(Address)
DAVIE, FLORIDA 33324
(City/State and Zip Code)
For further information concerning this matter, please call:
Tot factor information concerning and matter, product carry
SHAUKAT ALI at (954) 687-5021
SHAUKAT ALI at (954) 687-5021 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee
(Additional copy is Certified Copy
enclosed) (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	AJAZ, INC.	
SECOND:	The document number of the corporation (if known): P02000062502	
THIRD:	The date dissolution was authorized: 10/01/2005	
	Effective date of dissolution if applicable: 10/01/2005 (no more than 90 days after dissolution	<u> </u>
FOURTH:	Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	
	Dissolution was approved by of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled
	The number of votes cast for dissolution was sufficient for approval by	
		7 SF 05
	Signature: (By a director, president or other officer- if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	OS DEC 16 AM 9: 02 SECRETARY OF STATE TALLAHASSEE. FLORIDA
	SHAUKAT ALI	
	(Typed or printed name of person signing)	
	PRESIDENT	_
	(Title of person signing)	

Filing Fee: \$35