


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 16, 2003 8:00 am
Secretary of State

09-16-2003 90006 011 ***150.00

DOCUMENT # <i>P02000065891</i>	
1. Entity Name P02000065891 <i>A&J PRODUCE, INC</i>	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 12724 NEWFIELD DR		3. Mailing Address 12724 NEWFIELD DR	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State ORLANDO		City & State ORLANDO	
Zip FL	Country 32837	Zip FL	Country 32837

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0616678	Applied For
	Not Applicable

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
FL	

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]* 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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	JIE ZOU/ PRESIDENT 12724 NEWFIELD DR ORLANDO, FL32837	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

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: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CR2E034B (12/02)

Attachment #
80148654

A&J PRODUCE, INC
12724 NEWFIELD DR
ORALNDO, FL32837

SEP 11, 2003

Florida Department of State
P.O.BOX 6327
Tallahassee, FL 32314

SUBJECT: 2003 ANNUAL REPORT

DOCUMENT NUMBER: P02000065891

To whom it may concern,

Please note that I haven't received the 2003 Annual Report. Please check your record and make sure the address is accurate. Enclosed please find a check of \$150 for the filing fee, please kindly update your record.

Thank you for your assistance.

Sincerely yours



Jie Zou / President