

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000081496

Entity Name: KARJA INC.

FILED  
Jan 20, 2006  
Secretary of State

## Current Principal Place of Business:

5718 IMPERIAL KEY  
TAMPA, FL 33615

## New Principal Place of Business:

17401 BUMBLEBEE PASS  
LAND O LAKES, FL 34638

## Current Mailing Address:

5718 IMPERIAL KEY  
TAMPA, FL 33615

## New Mailing Address:

17401 BUMBLEBEE PASS  
LAND O LAKES, FL 34638

FEI Number: 02-0635222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AITKEN, KAREN  
5718 IMPERIAL KEY  
TAMPA, FL 33615 US

## Name and Address of New Registered Agent:

AITKEN, KAREN  
17401 BUMBLEBEE PASS  
LAND O LAKES, FL 34638 US

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.

SIGNATURE: KAREN AITKEN

01/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: AITKEN, KAREN  
Address: 5718 IMPERIAL KEY  
City-St-Zip: TAMPA, FL 33615

Title: VD ( ) Delete  
Name: AITKEN, JAMES  
Address: 5718 IMPERIAL KEY  
City-St-Zip: TAMPA, FL 33615

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: AITKEN, KAREN  
Address: 17401 BUMBLEBEE PASS  
City-St-Zip: LAND O LAKES, FL 34638

Title: VD (X) Change ( ) Addition  
Name: AITKEN, JAMES  
Address: 17401 BUMBLEBEE PASS  
City-St-Zip: LAND O LAKES, FL 34638

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN AITKEN

PD

01/20/2006

Electronic Signature of Signing Officer or Director

Date