

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000027220

**FILED
Nov 23, 2004
Secretary of State**

Entity Name: I N J, INC.

Current Principal Place of Business:

3393 OAK MEADOWS CT
MULBERRY, FL 338609480

New Principal Place of Business:

Current Mailing Address:

3393 OAK MEADOWS CT
MULBERRY, FL 338609480

New Mailing Address:

FEI Number: 75-3105703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AZUARA, EUSEBIO
3393 OAK MEADOWS CT
MULBERRY, FL 338609480 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AZUARA, EUSEBIO
Address: 3393 OAK MEADOWS CT
City-St-Zip: MULBERRY, FL 338609480

Title: V () Delete
Name: AZUARA, MARISELA
Address: 3393 OAK MEADOWS CT.
City-St-Zip: MULBERRY, FL 338609480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EUSEBIO AZUARA

P

11/23/2004

Electronic Signature of Signing Officer or Director

_____ Date