

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000146220

Entity Name: AJKK INC

FILED
Oct 12, 2005
Secretary of State

Current Principal Place of Business:

112 POINT SOUTH
WELAKA, FL 32193 US

New Principal Place of Business:

Current Mailing Address:

112 POINT SOUTH
WELAKA, FL 32193 US

New Mailing Address:

P O BOX 1355
WELAKA, FL 32193 US

FEI Number: 20-1798886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, SANDRA M
112 POINT SOUTH
WELAKA, FL 32193 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: SANDRA M PERKINS

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: PERKINS, SANDRA M
Address: 112 POINT SOUTH
City-St-Zip: WELAKA, FL 32193 US

Title: VP () Delete
Name: MORGAN, LESLIE
Address: 112 POINT SOUTH
City-St-Zip: WELAKA, FL 32193 US

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: SANDRA M PERKINS

P

10/12/2005

Electronic Signature of Signing Officer or Director

Date