2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

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DOCUMENT # P04000152563

AJ & K PROPERTIES, INC.



FILED Apr 21, 2008 08:00 A Secretary of State

Principal Place of Business

8105 NW 33RD STREET DORAL, FL 33122

Mailing Address

8105 NW 33RD STREET DORAL, FL 33122



04182008

No Chg-P

CR2E034 (11/05)

4. FEI Number 13-4288935

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUILLEN, LOLY 8105 NW 33RD STREET **DORAL, FL 33122**

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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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

П

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000912491 05/07/08-80082-016 150.00

OFFICERS AND DIRECTORS 10. PTD TITLE GUILLEN, ALEXIS NAME 8105 NW 33RD STREET STREET ADDRESS DORAL, FL 33122 CITY-ST-ZIP GUILLEN, LOLY NAME 8105 NW 33RD STREET STREET ADDRESS CITY - ST - ZIP DORAL, FL 33122 TITLE GUILLEN, ALEXIS JR. NAME STREET ADDRESS 8105 NW 33RD STREET CITY-ST-ZIP DORAL, FL 33122 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #