

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000120305

FILED
Sep 26, 2008
Secretary of State**Entity Name:** WAJU INVESTMENTS, INC.**Current Principal Place of Business:**4271 WOODBINE RD
PACE, FL 32571 US**New Principal Place of Business:****Current Mailing Address:**5734 JANET ST
MILTON, FL 32570 US**New Mailing Address:****FEI Number:** 20-5670307**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MILLS, WARREN
5734 JANET ST.
MILTON, FL 32570 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**OFFICERS AND DIRECTORS:****Title:** PRES () Delete
Name: MILLS, WARREN
Address: 5734 JANET ST
City-St-Zip: MILTON, FL 32570 US**Title:** TRES () Delete
Name: MILLS, JULIE
Address: 5734 JANET ST
City-St-Zip: MILTON, FL 32570 US**Title:** SECT () Delete
Name: MILLS, JULIE
Address: 5734 JANET ST
City-St-Zip: MILTON, FL 32570 US**Title:** DIR () Delete
Name: MILLS, WARREN
Address: 5734 JANET ST
City-St-Zip: MILTON, FL 32570 US**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** OWN () Change (X) Addition
Name: MILLS, HAROLD E
Address: 5753 MARIGOLD AVE
City-St-Zip: MILTON, FL 32570 US**Title:** OWN () Change (X) Addition
Name: MILLS, SHARRON K
Address: 5753 MARIGOLD AVE
City-St-Zip: MILTON, FL 32570 US

I hereby certify that the information supplied with this filing does not qualify 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: WARREN MILLS

PRES

09/26/2008

Electronic Signature of Signing Officer or Director_____
Date