

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000010450

**FILED**  
**Nov 14, 2008**  
**Secretary of State**

**Entity Name:** A&J PROFESSIONAL CLEANING, INC.

**Current Principal Place of Business:**

820 TIVOLI CIRCLE  
204  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

4235 N UNIVERSITY DR.  
302  
SUNRISE, FL 33351

**Current Mailing Address:**

820 TIVOLI CIRCLE  
204  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

4235 N UNIVERSITY DR.  
302  
SUNRISE, FL 33351

**FEI Number:** 20-8324825

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLAUDIO, AMAURY A SR.  
820 TIVOLI CIRCLE  
204  
DEERFIELD BEACH, FL 33441 US

**Name and Address of New Registered Agent:**

CLAUDIO, AMAURY A SR.  
4235 N UNIVERSITY DR.  
302  
SUNRISE, FL 33351 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: AMAURY A. CLAUDIO SR.

11/14/2008

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: CLAUDIO, AMAURY A SR  
Address: 820 TIVOLI CIRCLE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VP ( ) Delete  
Name: CLAUDIO, JENNIFER  
Address: 820 TIVOLI CIRCLE  
City-St-Zip: DEERFIELD BEACH, FL 33441

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CLAUDIO, AMAURY A SR  
Address: 4235 N UNIVERSITY DR.  
City-St-Zip: SUNRISE, FL 33351

Title: VP (X) Change ( ) Addition  
Name: CLAUDIO, JENNIFER  
Address: 4235 N UNIVERSITY DR.  
City-St-Zip: SUNRISE, FL 33351

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: JENNIFER CLAUDIO

VP

11/14/2008

Electronic Signature of Signing Officer or Director

Date