

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000031231

FILED  
Sep 28, 2010  
Secretary of State

Entity Name: AJB TRINIGIAL CORP

**Current Principal Place of Business:**

1158 WEST STATE ROAD 436  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

1158 WEST STATE ROAD 436  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

1158 WEST STATE ROAD 436  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 26-4634504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALVAREZ, TRINIDAD  
1158 WEST STATE ROAD 436  
ALTAMONTE SPRINGS, FL 32714 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: TRINIDAD ALVAREZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALVAREZ, TRINIDAD  
Address: 1158 WEST STATE ROAD 436  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: DIR  
Name: CORDOBA, GIANCARLO  
Address: 413 COMFORT DR.  
City-St-Zip: APOPKA, FL 32712 US

Title: DIR  
Name: BELIZ, ALEXANDER J  
Address: 413 COMFORT DR.  
City-St-Zip: APOPKA, FL 32712 US

I hereby 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 all other like empowered.

SIGNATURE: TRINIDAD ALVAREZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

09/28/2010

\_\_\_\_\_  
Date