FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Morthau ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P93000024342 (6) **DOCUMENT #** 1. Corporation Name A.J.K. MIAMI, INC. Principal Place of Business Mailing Address 5895 SOUTHWEST 35TH STREET 5895 SOUTHWEST 35TH STREET MIAMI FL 33155 MIAM! FL 33155 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1993 05/01/1995 2. Principal Place of Business 2a. Mailing Address EEL Number Applied For 26 65-0411732 Not Applicable Suite, Apt. #, etc. Suite Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 П Trust Fund Contribution Zφ Added to Fees Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 25 29 30 Fronda Statutes ☐ Yes ☐ No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BOYLE, NISA L ESQ Street Address (P.O. Box Number is Not Acceptable 82 5895 SOUTHWEST 35TH STREET **MIAMI FL 33155** В3 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Poriora, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fam: SIGNATURE Signature, typedia, probabilities of trajectory lagrantic. The distance also to HE Engineers Agent's problem expensed a min on or they OFFICERS AND DIRECTORS 13. CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.12006 Change Addition BOYLE, NISA L 1.2 NAME 5895 SOUTHWEST 35TH STREET 1.3 STREET ADDRESS. MIAMI FL 33155 1.4 CHY - ST - 2/F [] DELETE 2 1 III cF Change

12. TITLE NAME STREET ADDRESS CITY-S1-7IP TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CHTY - ST - 7IP TITLE DELETE 3 1 11748 Change Addition 3.2 NAME STREET ADDRESS 3.3 STEEL! ADDRESS CHTY-ST-ZIP 3.4 CITY - ST 7-P TILLE DELFTE 4.1 J-DE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3.STREET ADDRESS CITY-ST-Z:P 44 CHY ST-ZIP TULLE DELETE 5 1 TIFLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 City - ST ZIP TODE DELETE 5 1 Itt: 6 Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 Off v - 51 - 7iP

14. If do hereby certify that the information supplied with this fung is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3ik), Florida Statutes. Hurther certify that the information indicated on this annual report or supplies neutral annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

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Visa NING OFFICER OR DIRECTOR

Daytime Physics #