

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000014089

1. Entity Name

AJK of Orlando, Inc

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUN 27 PM 1:25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

P.O. Box 1751

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1751

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Apopka, FL

City & State

Apopka, FL

4. FEI Number

59-3224418

Applied For

Not Applicable

Zip

32704

Country

USA

Zip

32704

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JAMAL, Akber M.

Street Address (P.O. Box Number is Not Acceptable)

3015 Windchime Cir W

City

Apopka, FL

FL

Zip Code

32703

DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6-27-03

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSP
NAME Jamal, Akber M
STREET ADDRESS P.O. Box 1751
CITY-ST-ZIP Apopka, FL 32704

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300021176843
06/27/03--01041--008 **220.00

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6-27-03

CR2E034B (12/01)

DO NOT WRITE
IN THIS SPACE

6.27-03

To whom it may concern.

I did not recieve any notices for the
year 2003. (ASK of orlando, Inc, Alysha Enterprises, Inc,
Big K, Inc, Maitland Ave, Inc.)

I did not recieve any notices for the
year 2001, 2002, 2003, for Wynone Eteyrim,
Indre

Al Samuel