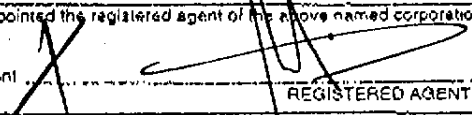
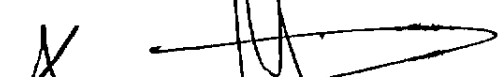


PLEASE READ ALL INSTRUCTIONS BEFORE COMPI

Apr 08 1998 8:00am
Secretary of State

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Apr 08 1998 8:00am Secretary of State	
DOCUMENT # P94000029827					
1 Corporation Name AJF GENERAL BUSINESS, Corp.					
Principal Place of Business 10583 NW 52 Terrace Miami, FL 33178			Mailing Address		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2 New Principal Office Address, If Applicable		3 New Mailing Office Address, If Applicable 10583 NW 52 Terr		4 Date Incorporated or Qualified To Do Business in Florida 4/19/94	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5 FEI Number 65-0483571	
City & State		City & State Miami FL		Applied For ☐ Not Applicable	
Zip		Zip 33178		Country DAVE	
6 CERTIFICATE OF STATUS DESIRED ☒				\$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4		
P	ALEJANDRO MEDINA	10583 NW 52 Terr	Miami FL 33178		
VP	FLORA MEDINA	10583 NW 52 Terr	Miami FL 33178		
D	JUAN MEDINA	10583 NW 52 Terr	Miami FL 33178		
			ES/8		
			900002482299		
			-04/08/98--01015--030		
			***150.00		
8. Name and Address of Current Registered Agent			9. Name and Address of Now Registered Agent		
ALEJANDRO MEDINA 10583 NW 52 Terr Miami FL 33178			Name ALEJANDRO MEDINA		
			Street Address (P.O. Box Number is Not Acceptable) 10583 NW 52 Terr		
			Suite, Apt. #, Etc.		
			City Miami		State FL
					Zip Code 33178
10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.					
Signature of Registered Agent 			Date 03/31/98		
REGISTERED AGENT MUST SIGN					
11 Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)					
12 I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(c), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE:  3/31/98					