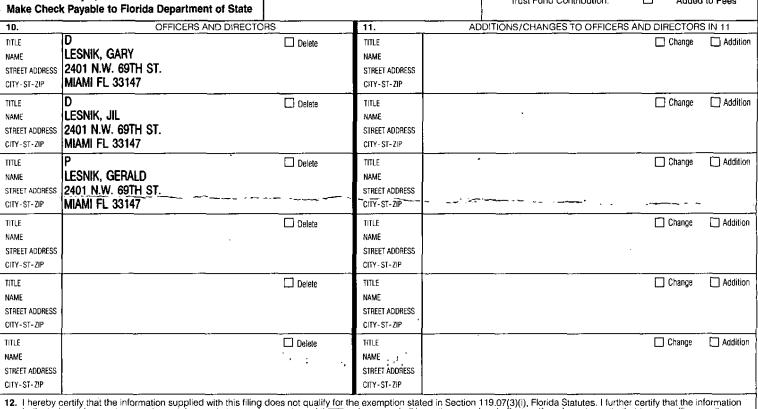
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9400076946 04-25-2003 90151 037 ***158.75 EJGJ CORP. Principal Place of Business 2401 N.W. 69TH ST. Mailing Address 2401 N.W. 69TH ST. MIAMI FL 33147 MIAMI FL 33147 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For 65-0538715 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIXON, SHARON Q Street Address (P.O. Box Number is Not Acceptable) 150 WEST FLAGLER ST. 2200 MUSEUM TOWER MIAMI FL 33130 Zip Code 8. Tife above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition LESNIK, GARY NAME NAME 2401 N.W. 69TH ST. STREET ADDRESS STREET ADDRESS

FILED Apr 25, 2003 8:00 am Secretary of State



12. 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 the 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 trusted empowered to execute this report as required by Shapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with as

SIGNATURE:

Daytime Phone #