FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



Sandra B. Mortham *

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P960000 92849
AJAMI CORPORATION

FILED Jun 19 1997 8:00am Secretary of State

MIAMI FL 33169 MIAMI FR 33169 3. Date Incorriorated or Qualified Jas. Date of Last Report 2. Principal Place of Business 2. Applied For 2. Principal Place of Business 2. Applied For 2. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & Stat	Principal Place of Business Mailing Address			
MIAMI FL 33169 MAMI FR 33169 A Date (Filed Faper) 2. Principa Prince of Hannes A Date of Leaf Faper) 2. Principa Prince of Hannes A Date of Leaf Faper) 2. Principa Prince of Hannes A Date of Leaf Faper) 2. Principa Prince of Hannes A Date of Leaf Faper) 2. Principa Prince of Hannes A Date of Leaf Faper) 2. Principa Prince of Hannes A Date of Leaf Faper) 3. Number of Leaf Faper) 3. Number of Leaf Faper	1001 NW 197 TERR 1001 NV	u 1977ERR		
2. Principle Place of Fluidness 2. Principle Place of Set Business Agent Place of Set Business Place Of Set Bu	TOOL HALL TOOL			
2. Principle Place of Fluidness 2. Principle Place of Set Business Agent Place of Set Business Place Of Set Bu	M			
2. Principo Pace of Humenos 21 COO No. 197 Terk 22 Coo No. 197 Terk 25 Coo No. 197 Terk 26 Coo No. 197 Terk 27 Coo No. 197 Terk 28 Coo No. 197 Terk 29 Coo No. 197 Terk 20 Coo No. 197 Ter	MIAMI 14 33169 MIAMI F	22169	3. Date incorporated or Qualified 3a. Date of Lasi Report	
Suite April & acc Suit		7 22101	11 13 76	
Suite Apt # etc 20 Suite Apt #, etc 3 Suite Apt #, etc 4 Suite Apt		W 197 TP.	pt	
County State 23 M1AMI, FL 39169 28 M1AMI FL 6. Election Campoint S5.00 May be reconstructed and contribution S5.00 May be reconstructed S5.00		<u> </u>	AC 35	
City & State 28 MIAMM			T 9. Gerundate di atams desiren 📝 🔻	
23 MAMIL FL 33164 28 MI AMIL FL 33164 28 MI AMIL FL 200000 1 PL 20 33169 30 Country 20 33169 30 Country 20 33169 30 P. The corporation has tablety for intended to the Be Applied to Field Statutes Post Device		,		
28 9 69 28 29 30 69 20 8. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10 O I No III AGBEYEGBE 11 AGBEYEGBEY AGAINST	han di a a a a a a a a a a a a a a a a a a	, FL		
JOHN I. AGBEYEGBE 10 O I NW 197 TERR. 82 Sireot Address (P.O. Box Number is Not Acceptable)	Zip Country Zip	Country		
JOHN I. AGBEYEGBE 10 O I NW 197 TERR. 82 Sireot Address (P.O. Box Number is Not Acceptable)	24 33169 25 29 33169	30		
DOHN I. AGBEYEGGE 82 Sired Address (P.O. Box Number is Not Acceptable)	Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Signature Street Address (P.C. Box Number is Not Acceptable) BB Street Address (P.C. Box Number is Not Acceptable)	Thur T. ACCCURAGE	81 Name		
MIAMI, FL 33169 11. Pursuant to the provisions of Sections 607 5092 and 607 1508. Elevida Statutes, the eabove named corporation submits this statement for the purpose of champing its registered agent of such that state of Friends Statutes (197 505, Friends Statutes). The provisions of Sections 607 505, Friends Statutes (197 505, Friends Statutes). The provisions of Sections 607 505, Friends Statutes. The provisions of Sections 607 507, Friends Statutes of Sections 607 507,	l	82 Street Addre	ose (P.O. Boy Number is Not Acceptable)	
MIAMI, FEL 33169 11. Pursuant to the purysons of Sections 607.0502 and 607.1508. Florida Statutes, thre above named corporation submits this statement for the puryson of changing its requisioned office or registered again, the composition of special parts of portion of 5056, florida Statutes, three above named corporation's board of directors. I horizoty accept the appointment as registered again. I provide the purpose of changing its requisioned special parts of the provided state of form of 5056, florida Statutes, three debugs and the provided special parts of the parts of the provided special parts of the provided special parts of the parts of t	1. 1001 NW 197 TERR.			
11. Parsuant to the provisions of Sections 607 6005 and 607 1506. Excide Statutes, the above named corporation submits this statement for the purpose of changing its registered office or opisitors again, a part of the purpose of changing its registered of the opisitors of the purpose of changing its registered of the opisitors of the purpose of changing its registered of the opisitors of the purpose of changing its registered of the opisitors of the purpose of the appointment as registered of the opisitors of the purpose of t	4	83		
11. Parsuant to the provisions of Sections 607 6005 and 607 1506. Excide Statutes, the above named corporation submits this statement for the purpose of changing its registered office or opisitors again, a part of the purpose of changing its registered of the opisitors of the purpose of changing its registered of the opisitors of the purpose of changing its registered of the opisitors of the purpose of changing its registered of the opisitors of the purpose of the appointment as registered of the opisitors of the purpose of t	Mismi To 22169	94 Cau		
1.1 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, three above named corporation submits this statement for the purpose of changing its registered office or organization gains in this state of fill or organization gains in this state of fill or organization gains in this state of fill organization gains of section (g) 0505. Florida Statutes and the companies of section (g)	mimily in Joing	O4 City	FL 85 Zip Code	
SIGNATURE 12. TITLE TOHN T	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statuti	es, the above-named corpo	pration submits this statement for the purpose of changing its registered	
SIGNATURE 12. TITLE TOHN T	office or registered agent, or both in the State of Floridan Such change was a agent. Lam familiar with 64.4 accomplete obligations of Section 607.0505, Floridan Such Change was a	iuthorized by _r the corporation orida Statutes.	on's board of directors. I hereby accept the appointment as registered	
12. ALPICERS AND JIRCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	SIGNATURE TOHN			
TOTH	Signature type i organización de ogistereg profit y id tille il applicable (NOT)			
NAME		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
13 STREET ADDRESS 14 CHTY-ST-ZIP	TITLE PIVISIT LI DELETE	1 1 11/11 [Change Addition	
13 STREET ADDRESS 13 STREET ADDRESS 14 CHTV - ST - ZPP	NAME TOLL TO ACCEPTE COF	12 NAME		
DELETE DELETE 2.1 THE DELETE 2.1 THE DELETE Add-tion Ad	STREET ADDRESS 1000 197 TERE	1 3 STREET ADDRESS		
NAME		1.4 City - S1 - ZiP		
	THILE DELECTE	2.1 TITLE	Change Add-tion	
City - St - ZiP	NAME	2 2 NAME		
THE DELETE STITLE STITLE STITLE STADRESS STREET ADDRESS CITY-ST-ZIP THE DELETE AT THE CHarge Addition NAME STREET ADDRESS CITY-ST-ZIP THE DELETE AT THE CHARGE STREET ADDRESS CITY-ST-ZIP THE DELETE STITLE STREET ADDRESS CITY-ST-ZIP THE DELETE STITLE THE STREET ADDRESS CITY-ST-ZIP THE DELETE STITLE THE STREET ADDRESS CITY-ST-ZIP THE STREET ADDR	STREET ADDRESS	2.3 STREET ADURESS	the state of the s	
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 41 TITLE Addition AMME STREET ADDRESS CITY-ST-ZIP DELETE 41 CITY-ST-ZIP DELETE 41 CITY-ST-ZIP TITLE DELETE Addition Addition Addition Addition Addition Addition Addition Addition Addition AMME STREET ADDRESS CITY-ST-ZIP DELETE CHANGE Addition Additio	· · · · · · · · · · · · · · · · · · ·	2 4 CITY+ST+ZiP		
STREET ADDRESS CITY-ST-7IP TITLE DELETE DELETE DELETE 4 1 THLE Addition NAME STREET ADDRESS CITY-ST-7IP TITLE DELETE DELETE 44 CITY-S1-7IP TITLE DELETE 51 THLE STREET ADDRESS CITY-S1-7IP TITLE DELETE 51 THLE STREET ADDRESS CITY-S1-7IP TITLE DELETE 51 THLE 5	TITLE U DELETE	31 TITLE	Change Addition	
GITY-SI-ZIP ITITE DELETE 4 1 THE 4 2 NAME STREET ADDRESS CITY-SI-ZIP TITLE DELETE 4 4 CITY-SI-ZIP TITLE DELETE 5 1 THEE 5 2 NAME 5 2 NAME 5 2 NAME 5 3 STREET ADDRESS CITY-SI-ZIP TITLE DELETE 5 1 THEE 5 1 THEE 5 1 THEE 6 1 THEE 6 1 THEE 6 2 NAME 6 2 NAME 6 3 STREET ADDRESS CITY-SI-ZIP THEE 6 3 STREET ADDRESS 6 4 CITY-SI-ZIP 1 0 0 0 2 2 1 8 3 4 1 Change Addition Addition Addition Addition Addition 1 0 0 0 2 1 8 3 4 1 Change Addition Addition Addition 1 0 0 0 2 1 8 3 4 1 Change Addition Addition 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1 Change Addition NAME 1 0 0 0 2 1 8 3 4 1	NAME	3.2 NAME	· ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE DELETE A4 CITY-S1-ZIP A4 CITY-S1-ZIP DELETE DELETE STREET ADDRESS CITY-S1-ZIP DELETE DELETE STREET ADDRESS CITY-S1-ZIP Change Addition AMME STREET ADDRESS CITY-S1-ZIP DELETE AT DITION ADDRESS CITY-S1-ZIP Addition ADDRESS ADD	STREET ADDRESS	3 3 STREET ADDRESS	· ·	
NAME STREET ADDRESS CITY-ST-ZIP 10TLE DETETE DETETE 5 1 TITLE STREET ADDRESS CITY-ST-ZIP DETETE 5 2 NAME 5 2 NAME 5 3 STREET ADDRESS CITY-ST-ZIP TITLE DETETE 6 1 TITLE 1 0 0 0 2 1 8 3 4 1 Change Addition Addition Change Addition 1 1 0 0 0 2 2 1 8 3 4 1 Change Addition 1 1 0 0 0 2 2 1 8 3 4 1 Change Addition 1 1 0 0 0 2 2 1 8 3 4 1 Change Addition 1 1 0 0 0 2 2 1 8 3 4 1 Change Addition 1 1 0 0 0 2 2 1 8 3 4 1 City-St-Zip 1 4 1 0 o 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 annual report is true and accurate and that my signature shall have the same legal officer as it made under coals, that				
STREET ADDRESS CITY- ST-ZIP 10TLE DETETE 5 1 TITLE 5 2 NAME 5 2 NAME 5 3 STREET ADDRESS CITY- ST-ZIP 10LE DELETE 6 1 TITLE 10 DELETE 6 1 TITLE 10 DELETE 6 2 NAME 6 2 NAME 10 DODD 2 21 8 3 4 1 10 DODD 2 18 3 4 1		4 1 THLE	Change Addition	
CITY-ST-ZIP INTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DELETE 5 1 TITLE 5 2 NAME 5 2 NAME 5 3 STREET ADDRESS CITY-ST-ZIP THLE DELETE 6 1 TITLE 6 2 NAME 6 2 NAME 6 3 STREET ADDRESS CITY-ST-ZIP 1. ODODO2218341 -06/20/97-01053-016 ****173.75 1. Odo hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal officer as it made under coalty that	NAME	4 2 NAMI		
TITLE NAME STREET ADDRESS CITY-ST-7IP DELETE Addition 5.2 NAME 5.3 STREET ADDRESS CITY-ST-7IP 5.4 CITY-ST-7IP DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-7IP 1.00002218341 Change Addition Addition Addition 1.00002218341 Change Addition 6.2 NAM: 6.2 NAM: 6.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-7IP 1.4 I do 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 furrier certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal officer as it made under coalty that	į	4.3 STREET ADDRESS	1,	
NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS GIV-ST-ZIP 100002218341 63 STREET ADDRESS GIV-ST-ZIP 14. I do 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 furrier certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal officer as it made under oath, that				
STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP 54 CITY-ST-ZIP 54 CITY-ST-ZIP 62 NAM: 62 NAM: 63 STREET ADDRESS CITY-ST-ZIP 100002218341 63 STREET ADDRESS CITY-ST-ZIP 14. I do 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 annual report is true and accurate and that my signature shall have the same legal officer as it made under oath, that			Addition	
CITY-S1-7IP TITLE DELETE 6 1 TITLE 6 2 NAM: 6 2 NAM: 6 3 STREET ADDRESS CITY-S1-7IP 1 00002218341 -06/20/9701053016 ***173.75 14. I do 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 annual report is true and accurate and that my signature shall have the same legal officer as if made under oath, that		5.2 NAME	$\langle m \rangle / \langle m \rangle_{\alpha}$	
TITLE NAME STREET ADDRESS CITY-S1-ZIP 1. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that	STREET ADDRESS	5.3 STREET ADDRESS	*//C0/14/U/\	
NAME STREET ADDRESS City-S1-2iP 14. I do 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 annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that			107/1/	
CNY-ST-ZIP ***173.75 14. I do 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 annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under path; that		6 1 1/1/LE	Change Addition	
CNY-ST-ZIP ***173.75 14. I do 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 annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under path; that	NAME.	62 NAME	100002218541 -00/20/0701052010	
14. I do hereby certify that the information supplied with this filing does not qualify does not examption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under path, that	STREET ADDRESS	6.3 STREET ADDRESS	-007 CU7 3101835018	
information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under party that				
Lam an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	information indicated on this annual report or supplemental arinual report is tri	ue and accurate and that n	by Signature shall have the same legal offect as it made under party that I	

AGBEYEGBE PRESIDENT