

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P97000076290**

1. Entity Name

**AJT HOLDING INC.****FILED**  
**Feb 13, 2001 8:00 am**  
**Secretary of State**

02-13-2001 90010 031 \*\*\*158.75

Principal Place of Business

**8910 ASTRONAUT BLVD.  
CAPE CANAVERAL FL 32920**

Mailing Address

**8910 ASTRONAUT BLVD.  
CAPE CANAVERAL FL 32920**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-3469417**

Applied For

Not Applicable

5. Certificate of Status Desired ☒**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TERAN, ALFREDO J  
808 W. CENTRAL BLVD.  
CAPE CANAVERAL FL 32920**

Name

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

City

**FL**

Zip Code

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☒  
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
PD	TERAN, ALFREDO J	808 W CENTRAL BLVD	CAPE CANAVERAL FL 32920	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP	DEEKS, PETER C	4155 CROOKED MILE ROAD	MERRITT ISLAND FL 32952	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
VS	WOOD, RICHARD G	255 BANANA BLVD	MERRITT ISLAND FL 32952	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP	HARGROVE, ARTHUR JR	1711 WALLER ROAD	HUNTSVILLE AL 35816	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
T	SHERARD, MARCO J	4780 YUMA TRAIL	MERRITT ISLAND FL 32952	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/8/2001

321.783.7989

C:\P\F034 (10/00)