

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

1902

FILED  
03 OCT 21 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000067276

1. Corporation Name

AJ INVESTMENT PROPERTIES, INC.

Principal Place of Business

Mailing Address

20805 SW 172 AVE.  
MIAMI FL 33187

PO BOX 570520  
MIAMI FL 33057  
US



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

4. Date Incorporated or Qualified To Do Business in Florida

07/29/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0854702

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	WILKINS, PAUL D	19200 SW 88 CT	MIAMI FL 33157
D	WILKINS, TAMARA E	19200 SW 88 CT	MIAMI FL 33157

600023970516  
10/21/03--01062--013 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~GARCIA, WILLIAM ESQ.~~  
201 ALHAMBRA CIR, STE 500  
CORAL GABLES FL 33134-5107

Name JORGE E. DE LA HOZ, CPA  
Street Address (P.O. Box Number is Not Acceptable)  
304 PALERMO AVENUE  
Suite, Apt. #, Etc.  
City CORAL GABLES State FL Zip Code 33134

CFR2040 (7/03)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/14/03

11. 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)(i), 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:

Tamara Wilkins  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-15-03

Date

305 232-3637

Daytime Phone #

272

October 13, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: A&J Investment Properties, Inc.  
FEI# 65-0854702  
Notice of Administrative Dissolution or Revocation

To Whom It May Concern:

On October 10, 2003, A&J Investment Properties, Inc., received a Notice of Administrative Dissolution or Revocation. Per our records, the above referenced corporation did not receive the prior two Uniform Business Report notices for 2003.

Therefore, we ask that the reinstatement fee be waived. Please find enclosed a check for \$150.00 to return to active status.

Should you require additional information, please do not hesitate to contact me at (305) 232-3637

Sincerely,

Tamara E. Wilkins