49-038-\$158.75-\$158.75

FILE NUW: FILING FEE AFTEK MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Feb 26, 1999 8:00 am Secretary of State

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DOCUMENT #	P98000084931
A Description Name	

THE AJB	GROUP, INC.			Jaroporti do deste entre deste don deste della de	HA 1889 6 810 1818 1 11 1		
Principal Place	e of Business	Mailing Address		,			
68 W 7TH ST HIALEAH FL 33	012	68 W 7TH ST HIALEAH FL 33012		DO NOT WRITE IN T	HIS SPACE		
				3. Date Incorporated or Qualifed 10/02/1998			
2. Principat Pl	lace of Business	2a. Mailing Address	- 17-	4. FEI Number	Applied	For	
21 686	W-751	26 68W73	5 <i>V</i>	65-0879683	Not App	icable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additi Fee Require		
City & State	ialean Fl	28 / na/eals	F	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fe		
23 / 77 2ip	Country	Zip	Country	8. This corporation owes the current year			
21 330	10 25 MALLE	29 33010 3	a Made	Personal Property Tax.	☐Yes ☐N	0	
241 000	9. Name and Address of Current	<u> </u>		10. Name and Address of New Register	ed Agent		
DEM	TO OLGA		61 Name	Same		1	
l	ITO, OLGA V 7TH ST		82 Street Addr	ess (P.O. Box Number is Not Acceptable)			
HIAL	EAH FL 33012		83				
			84 City		85 Zip Code		
					- <u>L</u>		
11, Pursuant office or n agent. I a	to the provisions of Sections 607.0502 egistered agent or both, in the State or familiar with and accept the obligations.	and 607.1508, Florida Statutes I Florida, Such change was aut ons of Section 607.0505, Florid	i, the above-named corp horized by the corporation is Statutes.	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	or changing its register	ed	
SIGNATURE	Call Wille	~ /	agisterad Agent signature required			— (,	_
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		N 12	ç
TITLE	D	DELETE	1.1 TITLE			Addition	7
NAME	BENITO, OLGA	. •	12 NAVE			1:	2
STREET ADDRESS	68 W 7TH ST		1.3 STREET ADDRESS				ü
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CITY-ST-2#P				۵
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ameracas,	•		2.3 STREET ADDRESS			}	
CITY-ST-ZIP			2.4 CITY-\$T-ZIP				
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·		☐ OELETE	3.2 NAME 3.3 STREET ADDRESS	Z Company of the second		Addition =	2 2
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14. Thereby 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or point attachment with an address, with all other like empowered.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS