FILED
Apr 10, 2000 8:00 am
Secretary of State
04-10-2000 90042 016 ***150.00
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DOCUMENT # P9900074723  1. Entity Name  AJBEK, INC.					Apr 10, 2000 8:00 am Secretary of State 04-10-2000 90042 016 ***150.00		
Principal Place 9139 VINEYARD PLANTATION FL	LAKE DRIVE	Mailing Address 9139 VINEYARD LAKE DRIVE PLANTATION FL 33324-6144					
" je	ace of Business  Dixie Highway  #, etc.	3. Mailing Address 3601 N Dix Suite, Apt. #, etc.	ie Highw	ay	DO NOT WRITE	IN THIS SPACE	
City & State	Beach, FL	City & State Pompano Beac	<u>-</u>	4.	65-094729	)5 No	plied For t Applicable
33064	Country USA	Zip 33064	Country USA	5.	Certificate of Status Desired	□ \$8.75 Add	
	6. Name and Address of Current F				Name and Address of New Reg	istered Agent	
9139	oglu, bekir s Vineyard`lake drive <u>Itation</u> Fl.33324		185	ddress (P.O. I	lu, Bekir S.  Box Number is Not Acceptable)  h West 94th Ave	FL Zip Cod	e 22
SIGNATURE _  9. This corpo  Tax filing re	named entity submits this statement for Grand Signature, typed or printed name of registered agent ar ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	Bekir S. G	esoglu Registered Agent signat II FEE IS \$150. DO Fee will be \$150.	ure required when		1/22/2000 DATE \$5.0	O May Be
11.	OFFICERS AND D	DIRECTORS	12.		DDITIONS/CHANGES TO OFFICE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gesoglu, Bekir S 9139 Vineyard Lake Drive Plantation FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1852	lu, Bekir S. North West94th ation, FL 3332	1	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERT UZUN, AJLAN 4166 SW 66TH LANE DAVIE FL=33314	☐ Delate	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D Mert I 2741 I	Jzun, Ajlan NE 45th Street	<b>A</b> Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>1519NE</del> 1	nouse Point, Fi	33064 Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE		☐ Delete	TITLE			☐ Change	Addition

2000, UNIFORM BUSINESS REPORT (UBR)

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: \_

NAME

STREET ADDRESS

Bekir S. Gesoglu

(154) 784-4090

<sup>13.</sup> 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 all other like empowered.