

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0371298 AV

DOCUMENT # P99000074723

1. Entity Name
AJBEK, INC.



FILED

03 NOV 10 AM 8:31

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
10160 W.OAKLAND PK BLVD
SUNRISE FL 33315
US

Mailing Address
10160 W.OAKLAND PK BLVD
SUNRISE FL 33315
US



REINSTATEMENT

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

1852 NW 94th Ave

1852 NW 94th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plantation, FL

City & State

Plantation, FL

Zip

33322

Country

Broward

Zip

33322

Country

Broward

4. FEI Number

65-0947295

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

TOMLINSON, JOHN L

500 NW 62ND ST

STE 455

FORT LAUDERDALE FL 33309

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
GESOGLU, BEKIR S
1852 N WEST 94TH AVE
PLANTATION FL 33322 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100024573221
11/10/03--01100--013 **150.00 ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowers.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-05-03

Date

(954) 771-9326

Daytime Phone #

CR2E034 (10/02)

Ajbeck, Inc.
1852 NW 94th Avenue
Plantation, Florida 33322
954-771-9336

November 5, 2003

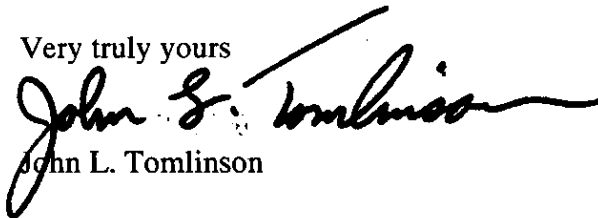
Florida Department of State
Uniform Business Reports
P.O. Box 1500
Tallahassee, FL 32302

RE: Reinstatement

Gentlemen:

We moved our mailing address during 2002 and did not receive the UBR until this week. Please change our address and waive the penalty.

Very truly yours

A handwritten signature in black ink, appearing to read "John L. Tomlinson", with a long, sweeping horizontal stroke extending to the right.

John L. Tomlinson