2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 07, 2001 8:00 am Secretary of State DOCUMENT # P99000099200 1. Entity Name A.J.A.J., INC. 05-07-2001 90048 018 ***158.75 Principal Place of Business Mailing Address 2666 E. OAKLAND PARK BLVD. 2666 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306 2. Principal Place of Business 3. Mailing Address LLCE OLDKIAND PANK Blue DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For 4. FEI Number 65-0961511 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MOREHEAD, SHERI Street Address (P.O. Box Number is Not 1905 NW 3RD AVENUE FORT LAUDERDALE FL 33311 City 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 FILE NOW!!!-FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (10/00) Change TITI F TITLE 🔀 Delete Arthur Stengel MOOREHEAD, SHERI NAME NAME 2225 NE 20 AVE STREET ADDRESS STREET ADDRESS 1905 NW 3RD AVE FL 33305 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33311 Manors Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS Wilton Manors 33305 CITY-ST-ZIP CITY-ST-ZIP ÎIÎLÊ Delete TITLE -- Change - Addition-NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 13 address, with all other like empowered