DOCUMENT# 5740	7.3		A A PART A CONTRACT	
A. & J. Medicon	Corp.		FILED	
Principal Place of Business	Mailing Addison		01 APR 30 PM 12: 51	
12260 SW 8=	PD. B	ox 832521 liami FI	SECRETARY OF STATE TALLAHASSEE FLORIDA	
Miami Fl. 33/84	•	33583)	
. Principal Place of Business	3. Mailing Address	× 832520		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	x 832527	DO NOT WRITE IN THIS SPACE	
City & State	City & State	<u> </u>		lied For
Zip Country	Zip	Country	¢0.75	Applicable
	33283	N.5A.	Fee Required	01181
6. Name and Address of Current R	egistered Agent	Name	7. Name and Address of New Registered Agent	
Alex R Lanza		Street Addres	ss (P.O. Box Number is Not Acceptable)	··
14554 DW 94 L	~	 		
Miami Fl. 3318,	6	City	FL Zip Code	
SNATURE Signature, typed or printed name of repistered agent and	d title if applicable. (N	OTE: Registered Agent signature requ	stered agent, or both, in the State of Florida. ared when reinstains) DATE 10. Election Comparing Financing 25.00	
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