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May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V40772 (8)

1. Corporation Name

THE AJAY CORPORATION, INC.

Principal Place of Business

8010 ORANGE AVENUE  
FORT PIERCE FL 34947  
US

Mailing Address

P.O. BOX 12627  
FORT PIERCE FL 34979-2627  
US



3. Date Incorporated or Qualified

06/01/1992

3a. Date of Last Report

07/30/1996

4. FEI Number

59-3125972

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21 8002 WESTMONT DRIVE

Suite, Apt. #, etc.

2a. Mailing Address

26 8002 WESTMONT DRIVE

Suite, Apt. #, etc.

City & State

23 Ft. Pierce, FL

Zip

Country

24 34951

25

USA

City & State

28 Ft. Pierce, FL

Zip

Country

29 34951

30

USA

9. Name and Address of Current Registered Agent

SANTIUSTE, ERNESTO  
2205 SW 16TH AVE  
VERO BEACH FL 32962

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

8002 WESTMONT DRIVE

83

84 City

Ft. Pierce

FL

85 Zip Code

34951

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME SANTIUSTE, ERNESTO

STREET ADDRESS 2205 SW 16TH AVE.

CITY- ST- ZIP VERO BEACH FL

TITLE VP ☐ DELETE

NAME SANTIUSTE, ANTONIA

STREET ADDRESS 2205 SW 16TH AVE.

CITY- ST- ZIP VERO BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

8002 WESTMONT DRIVE  
FT. PIERCE, FL 34951

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

8002 WESTMONT DRIVE  
FT. PIERCE, FL 34951

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Antonia Santuste ANTONIA SANTIUSTE

4-26-97

561/461-1746

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0474538

CR2E034 (9/96)