2002 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State
03-11-2002 90088 001 ***158.75

DOCUMENT # P00000094725

1. Entity Name

CHIMKO U.S. CORPORATION

426500

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1900 GLADES ROAD	11501 NW 4 STREET
Suite, Apt. #, etc. 280	Suite, Apt. #, etc.
City & State BOCA RATON, FLORIDA	City & State PLANTATION, FLORIDA
Zip 33431 / Country U.S.A.	Zip 33325 / Country U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1046286 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: LATIFIAN, Onik

Street Address (P.O. Box Number is Not Acceptable): 1900 Glades Road, Suite 280

City: Boca Raton FL Zip Code: 33431

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.

SIGNATURE: Onik Latifian — Feb-20-2002

Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
D	DIMITROVA, Vesselka	8 Bielo Pole	Sofia, Bulgaria
D	DIMITROV, Valentin	8 Bielo Pole	Sofia, Bulgaria
D	MAKARIEV, Martin	1517 Bielovodskiy Put	Sofia, Bulgaria

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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Onik Latifian — Feb-20-2002 — (954) 536-8084

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MR. ONIK LATIFIAN