FILED
Mar 28, 2003 8:00 am
Secretary of State
03-28-2003 90056 005 ***158.50

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000045209

1. Entity Name
LUKSMAN USA, INC.

Principal Place of Business	Mailing Address
4818 PALM TREE CT WINDERMERE, FL 34786	4818 PALM TREE CT WINDERMERE, FL 34786

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
4913 CASON COVE DR		4913 CASON COVE DR	
Suite, Apt #, etc. Suite 216		Suite, Apt #, etc. Suite 216	
City & State ORLANDO, FLORIDA		City & State ORLANDO, FLORIDA	
Zip 32811	Country ORANGE	Zip 32811	Country ORANGE

4. FEI Number ☒ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
ANTONOS, LUDMILS A SR
4818 PLAM TREE CT
WINDERMERE, FL 34786

7. Name and Address of New Registered Agent
Name LUDMILS ANTONOS SR
Street Address (P.O. Box Number is Not Acceptable) 4913 CASON COVE DRIVE
Suite 216
City ORLANDO FL Zip Code 32811

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] 03/27/03
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	P ANTONOS, LUDMILS C SR 4818 PALM TREE CT WINDERMERE, FL 34786	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LUDMILS ANTONOS 4913 CASON COVE DR # 216 ORLANDO, FL 32811	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CHRISTOPHE ANTONOS 4913 CASON COVE DR # 216 ORLANDO, FL 32811	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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 empowered.

SIGNATURE: [signature] 03/27/03 407 4354535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

4/28/03 CORPORATE DETAIL RECORD SCREEN 10:47 AM

NUM: P02000045209 ST:FL ACTIVE/FL PROFIT FLD: 04/25/2002
FEI#: APPLIED FOR
NAME : LUKSMAN USA, INC.
PRINCIPAL: 4913 CASON COVE DR. CHANGED: 03/28/03
ADDRESS SUITE 216
ORLANDO, FL 32811
RA NAME : ANTONOS, LUDMILS A SR
RA ADDR : 4913 CASON COVE DRIVE ADDR CHG: 03/28/03
ORLANDO, FL 32811
ANN REP : (2003) A 03/28/03

4/28/03 OFFICER/DIRECTOR DETAIL SCREEN 10:48 AM

CORP NUMBER: P02000045209 CORP NAME: LUKSMAN USA, INC.
TITLE: P NAME: ANTONOS, LUDMILS C SR
4913 CASON COVE DR. #216
ORLANDO, FL 32811
TITLE: V NAME: ANTONOS, CHRISTOPHER
4913 CASON COVE DR.#216
ORLANDO, FL 32811