2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P14211 **DOCUMENT#** 1. Entity Name KINASHA CORPORATION, N.V.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mailing Address

660 SACRAMENTO ST

Principal Place of Business

660 SACRAMENTO ST

STE 302

IGNATURE:

FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90130 014 ***150.00



STE 302 SAN FRANCISCO CA 94111-2527 US 2. Principal Place of Business Suite, Apt. #, etc.		STE 302 SAN FRANCISCO CA 94111-2527 US 3. Mailing Address Suite, Apt. #, etc.						
City & State					CHECK HERE IF MAKING CHANGES			
City & 3		City & State		4.	FEI Number 98-006034	13		pplied For
Zip	Country	Zip	Country	5.	Certificate of Status Desired		\$8.75 Ad	lot Applicable Iditional
6. Name and Address of Current Registered Agent				7.	Name and Address of New		Fee Require	<u>≱d</u>
REGENCY REALTY GROUP, INC. ATTN: ROBERT L. MILLER VARD 121 W. FORSYTH ST., SUITE 200 JACKSONVILLE FL 32202				Name Street Address (P.O. Box Number is Not Acceptable) City Zip Code				
SIGNATURE	re named entity submits this statement for ations of registered agent. Signature, typed or printed name of segment and FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 or keep Payable to Florida Department of Sec.	NOTE:	registered office			DATE	\$5.0	O May Be to Fees
10.	OFFICERS AND DI	RECTORS	11.	AC	DDITIONS CHANGES TO OF	FICERS ANI	D DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MURDAYA, HARTATI 660 SACRAMENTO ST STE 302 SAN FRANCISCO CA 94111-2527 C MURDAYA, WINYAWIMARTA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		to Co	reco	f Change	
TREET ADDRESS	660 SACRAMENTO ST STE 302 SAN FRANCISCO CA 94111-2527		NAME STREET ADDRESS CITYEST-ZIP	[AYA,WIDYAW	//MAR	<i>TA</i> 	: · · • · · · · · · · · · · · · · · · ·
ITLE AME TREET ADDRESS ITY-ST-ZIP	S KURNIAKWAN, ANTONA 660 SACRAMENTO ST STE 302 SAN FRANCISCO CA 94111-2527	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	KURNI	IAWAN AN	TONO	Change	Addition
TLE AME REET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
LE ME REET ADDRESS Y-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	Change	Addition
LE ME EET ADDRESS Y-ST-ZIP	00007	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Addition
	ertify that the information supplied with this on this report or supplemental report is true oration or the receiver or trustee empowers or on an attachment with an address, with a		exemption state signature shall ha required by Chap	ed in Section 11 ve the same leg oter 607, Florida	9.07(3)(i), Florida Statutes. I gal effect as if made under or Statutes; and that my name	further certifath; that I an appears in	fy that the info n an officer or Block 10 or Bi	rmation director ock 11 if