

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90978 005 ***150.00

0173137

DOCUMENT # P93000056282

1. Entity Name
SHKOL, INC.

Principal Place of Business
C/O SHOOP MOTORS
1605 ALTON CT
MIAMI BCH FL 33139
US

Mailing Address
275 W 33 ST
MIAMI BEACH FL 33140

8



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
339 Poinciana Isl.
 Suite, Apt. #, etc.

City & State

City & State
Sunny Isl.

4. FEI Number **65-0430300**

Applied For
 Not Applicable

Zip Country

Zip Country
33160 USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHKOLNIK, RAUL
275 W 33 ST
MIAMI BEACH FL 33140

Name **SHKOLNIK, ALEX**
 Street Address (P.O. Box Number is Not Acceptable)
339 Poinciana Isl
 City **Sunny Isl FL** Zip Code **33160**

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 *Alex Shkolnik*
 Signature, typed or printed name of registered agent and title if applicable.

4.22.01
 DATE

(NOTE: Registered Agent signature required when reinstating)

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	D			<input checked="" type="checkbox"/>
	SHKOLNIK, RAUL	275 W 33 ST	MIAMI BEACH FL 33140	
	V			<input type="checkbox"/>
	SHKOLNIK, ALEX	412 PONCIANA ISL	N MIAMI BEACH FL 33160	
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	SHKOLNIK, ALEX	339 Poinciana Isl	Sunny Isl. FL. 33160	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Alex Shkolnik*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.22.01 (305) 674-9000
 Date Daytime Phone #

CR2E034 (10/00)