

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000091290

1. Entity Name
KOKOPELLI TRADERS, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90005 043 ***150.00

Principal Place of Business Mailing Address
9160 NORTHWEST 14TH STREET 9160 NORTHWEST 14TH STREET
PLANTATION FL 33322 PLANTATION FL 33322-4306



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.
3. Mailing Address Suite, Apt. #, etc.

City & State City & State

4. FEI Number 65-0625666 Applied For Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 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)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

Table with 2 columns: OFFICERS AND DIRECTORS. Rows include Peter A DERNIER and Nicole H. DERNIER with titles and addresses.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Includes checkboxes for Change and Addition.

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: [Signature] 2/24/00 9544527981
Date Daytime Phone #

CR2E034 (9/99)