

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

019417

DOCUMENT # P99000058111

1. Entity Name
PALNIKS INTERNATIONAL, INC.

04-04-2001 90140 037 ***150.00

Principal Place of Business
9350 SOUTH DIXIE HIGHWAY
PH 2
MIAMI FL 33156

Mailing Address
9350 SOUTH DIXIE HIGHWAY
PH 2
MIAMI FL 33156

D0031213



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1111 KANE CONCOURSE
 Suite, Apt. #, etc.
#607

3. Mailing Address
1111 KANE CONCOURSE
 Suite, Apt. #, etc.
#607

City & State
BAY HARBOR ISLANDS, FL
 Zip **33154** Country **USA**

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BAY HARBOR ISLANDS FL
 Zip **33154** Country **USA**

4. FEI Number **65-0933907**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

KATSMAN, MARK ESQ.
9350 SOUTH DIXIE HIGHWAY
PH 2
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name **MARK KATSMAN, ESQ.**
 Street Address (P.O. Box Number is Not Acceptable)
1111 KANE CONCOURSE, #607
 City **BAY HARBOR IS. FL** Zip Code **33154**

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 *Mark Kat* Attorney 4-2-01
Signature, typed or printed name of registered agent and title (NOTE: If Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
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	PVST POPOV, VLADIMIR 9350 SOUTH DIXIE HIGHWAY MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POPOV, VLADIMIR 9350 SOUTH DIXIE HIGHWAY MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD POPOVA, TATIANA 9350 S. DIXIE HWY MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	1111 KANE CONCOURSE, #607 BAY HARBOR IS, FL 33154	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Vladimir Popov, Director* 4-2-01 305-867-2900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)