

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90138 032 \*\*\*150.00

**DOCUMENT # P99000095847**

1. Entity Name  
**EGE (USA), INC.**

Principal Place of Business      Mailing Address  
**1012 PROSPECT ROAD      1012 PROSPECT ROAD**  
**OAKLAND PARK FL 33334      OAKLAND PARK FL 33334-3822**



DO NOT WRITE IN THIS SPACE

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

4. FEI Number **65-0970968**      Applied For  
 Not Applicable  
 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**

**KATES, ELIZABETH J ESQ.**  
**4411 NORTHWEST TENTH STREET**  
**COCONUT CREEK FL 33066**

Name **TANNER GOKALP**  
 Street Address (R.F. Box Number is Not Acceptable) **1012 N.W. 44 STREET**  
 City **OAKLAND PARK** FL Zip Code **33334**

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 (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**

| 11. OFFICERS AND DIRECTORS                     |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |  |
|--|---|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PTD</b><br><b>GOKALP, TANER</b><br><b>4700 SW 51ST STREET SUITE 207</b><br><b>FORT LAUDERDALE FL 33314</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>1012 N.W. 44 STREET</b><br><b>OAKLAND PARK, FLORIDA 33334</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VD</b><br><b>GOKALP, MURAT</b><br><b>4700 SW 51ST STREET SUITE 207</b><br><b>FORT LAUDERDALE FL 33314</b> <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>1012 N.W. 44 STREET</b><br><b>OAKLAND PARK, FLORIDA 33334</b>            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>SD</b><br><b>GOKALP, AYSUN</b><br><b>4700 SW 51ST STREET SUITE 207</b><br><b>FORT LAUDERDALE FL 33314</b> <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>1012 N.W. 44 STREET</b><br><b>OAKLAND PARK, FLORIDA 33334</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)