

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 AM 11:17

DOCUMENT # **V65980**

(7)

1. Corporation Name

FINLANDIA ASSOCIATES, INC.

Principal Place of Business

2385 NW 34TH AVE.
COCONUT CREEK FL 33066
US

Mailing Address

2385 NW 34TH AVE.
COCONUT CREEK FL 33066
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/23/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0329603

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEENA MAKILA
2385 NW 34TH AVE.
COCONUT CREEK FL 33066

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Leena Makila

Leena Makila

3/20/95

Signature typed or printed name of registered agent and title if applicable

(If not, Registered Agent signature required when appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME VOUTILA, JUKKA
STREET ADDRESS 2385 NW 34TH AVE.
CITY ST ZIP COCONUT CREEK FL

11 TITLE D ☒ Change ☐ Addition
12 NAME Voutila, Jukka
13 STREET ADDRESS (not Director anymore)
14 CITY ST ZIP

TITLE P
NAME MAKILA, LEENA
STREET ADDRESS 2385 NW 34TH AVE.
CITY ST ZIP COCONUT CREEK FL

21 TITLE D ☒ Change ☐ Addition
22 NAME Koppanen, Martti
23 STREET ADDRESS (not Director anymore)
24 CITY ST ZIP

TITLE D
NAME KOPPANEN, MARTTI
STREET ADDRESS VESJARVENKATU 5-7 D 41
CITY ST ZIP FINLAND EU

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Leena Makila

Leena Makila

3/20/95

(305) 9798525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number