


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 21, 2004 8:00 am**  
**Secretary of State**

06-21-2004 90001 019 \*\*\*158.75

<b>DOCUMENT # V29803</b> 1. Entity Name <b>BIKINI CITY, INC.</b>	
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Principal Place of Business <b>16690 COLLINS AVE N MIAMI BEACH, FL 33160 US</b>	Mailing Address <b>16690 COLLINS AVE N MIAMI BEACH, FL 33160 US</b>
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**54058082**



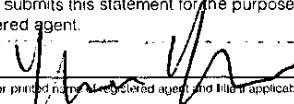
2. Principal Place of Business Suite/Apt. #, etc.	3. Mailing Address Suite/Apt. #, etc.
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City & State	City & State	4. FEI Number <b>65-0328072</b>	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

06152004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent <b>YAAKOV, YONI 151 SUNNY ISLES BLVD N MIAMI BACH, FL 33160</b>	
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7. Name and Address of New Registered Agent Name <b>Yoni Yaakov</b> Street Address (P.O. Box Number is Not Acceptable) <b>16690 Collins Ave</b> City <b>N. miami Beach</b> FL Zip Code <b>33160</b>	
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B. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE <b>JUNE - 17 - 04</b>

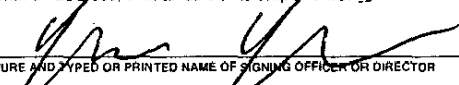
**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD YAAKOV, YONI 151 SUNNY ISLES BLVD N MIAMI BEACH, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD YAAKOV, ORA 151 SUNNY ISLES BLVD N MIAMI BEACH, FL <input checked="" 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	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed or on an attachment with an address with all other like empowered.

SIGNATURE: 	DATE <b>JUN 17 - 04</b> 305 949-8512
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

Attachment  
Doc # V29803  
54058082

Jun. 17 2004.

I spoke yesterday with  
somebody at the division of  
corporations and she told me  
to fill out the form and pay  
\$150,- because I never received  
these documents before.

Document # V29803, Bikini City Corp.  
Please in the future mail any  
documents to 16690 Collins Ave  
N. Miami BCH, FL 33160

Because I just see now on the  
form that you have the wrong  
address.

Thank you,

Yoni Yaakov  
(305) 949-8512