2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUI 1. Entity Nam BIKINI CI				06-21-2004 90001 019 ***158.75
Principal Place of Business Mailing Address		-		54058082
16690 COLLINS AVE N MIAMI BEACH, FL 33160 US		16690 COLLINS AVE N MIAMI BEACH, FL 33160 US		34038082
				I SARIT BISSIE TIRAR (STET IETI) BENER IIII BISK BIRU RIRIK ETRIK ETRIK EFRIERE II IREK
2. Principal Place of Business		3. Mailing Address		
— Suite : Apt.:	#,:010-	Suite: Aptn#; eta		. 06152004 ₄₇ , -, Chg-P _{104, April 2} , CR2E034 (10/03)
City & State	e	City & State		4. FEI Number Applied For 65-0328072 Not Applicable
Zip	Country	Zip C	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent
YAAKOV, YONI			Name	ion. Vaakov
151 SUNNY ISLES BLVD N MIAMI BACH, FL 33160			Street Addre	ess (P.O. Box Number is Not Acceptable)
			- 1.166	70 Collins Ave - 1111 - 1111
in mani Brac				iami Brach FL Zip Code 33160
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed in my september agent and blief applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10.	PSD OFFICERS AND E	Delete	TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Addition
NAME	YAAKOV, YONI	. Delete	NAME	·
. STREET ADDRESS CITY-ST-ZIP	151 SUNNY ISLES BLVD N MIAMI BEACH, FL		STREET ADDRESS CITY-ST-ZIP	and the second of the second o
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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 adgress, with all other like empowered.

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

NATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNP-17-09

305 949-85

Date

Davisma Broom d

Attachment Dr.# V29803 54058082 Jun. 17. 2004. I spoke yesterday with some body 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 # V 29803 Bilini City Corp. Please in the future mail any documents to 16690 Collins Ave <u>N.Miami</u> B(H, Fl 33160

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

Thank You,

Joni Jaakov (305) 949-8512