

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000097281

**Entity Name:** COLKAR CORPORATION

**Current Principal Place of Business:**

6574 NORTH STATE ROAD 7, #391  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

6574 NORTH STATE ROAD 7, #391  
COCONUT CREEK, FL 33073 US

**FEI Number:** 82-3874542

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LYNCH, COLLKIN G  
6574 NORTH STATE ROAD 7, #391  
COCONUT CREEK, FL 33073 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P, CEO  
Name LYNCH, COLLIN G  
Address 6574 NORTH STATE ROAD 7, #391  
City-State-Zip: COCONUT CREEK FL 33073

Title VP, SECRETARY  
Name LYNCH, KAREN E  
Address 6574 NORTH STATE ROAD 7, #391  
City-State-Zip: COCONUT CREEK FL 33073

Title VP, TREASURER  
Name LYNCH, JOSEPH  
Address 6574 NORTH STATE ROAD 7, #391  
City-State-Zip: COCONUT CREEK FL 33073

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** COLLIN LYNCH

P. CEO

04/30/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date