

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G 291771**

1. Entity Name

BONINCO CORPORATION

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 90198 027 ***150.00

Principal Place of Business

Mailing Address

2. Principal Place of Business

3326 E. Atlantic Blvd

Suite, Apt. #, etc.

3. Mailing Address

3326 E. Atlantic Blvd.

Suite, Apt. #, etc.

C0069673

DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach FLORIDA

City & State

Pompano Beach FLORIDA

4. FEI Number

59-2290479

Applied For

Not Applicable

Zip

33062

Country

Zip

33062

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MONIQUE LOGNOS
3590 Blue Lake Drive Bldg #A
Pompano Beach FLORIDA 33064

7. Name and Address of New Registered Agent

Name

OMER YASAR KARAKUTUK

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

3326 E. Atlantic Blvd.

City

Pompano Beach

FL

Zip Code

33062

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

[Signature]

OMER YASAR KARAKUTUK

4/26/2001

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

(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, 2001 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. **President** OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **MONIQUE LOGNOS** ☐ Delete
NAME
STREET ADDRESS **3590 Blue Lake Drive Bldg #A**
CITY-ST-ZIP **Pompano Beach FL 33064**

TITLE **President** ☐ Change ☒ Addition
NAME
STREET ADDRESS **OMER YASAR KARAKUTUK**
CITY-ST-ZIP **3326 E. Atlantic Blvd. Pompano Beach FL 33062** ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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] **OMER YASAR KARAKUTUK**

4/26/01 (954) 9415014

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)