

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # J83440

1. Entity Name
FLORIDA CHINA KWIK, INC.



Principal Place of Business
201 WEST FIRST ST
SUITE 300
SANFORD, FL 32771

Mailing Address
201 WEST FIRST ST
SUITE 300
SANFORD, FL 32771



03312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2831111
Applied For
No: Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NELSON, LARRY W
201 W FIRST ST
SANFORD, FL 32771

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

000000840654

05/28/08-80075-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PAULUCCI, JENO F.
STREET ADDRESS	201 W. FIRST ST.
CITY-STATE-ZIP	SANFORD, FL
TITLE	VPT
NAME	NELSON, LARRY W.
STREET ADDRESS	201 W FIRST ST
CITY-STATE-ZIP	SANFORD, FL
TITLE	VS
NAME	LIVINGSTON, CALVIN J
STREET ADDRESS	201 W FIRST ST
CITY-STATE-ZIP	SANFORD, FL 32771
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.18.08

Date

Daytime Phone #

AS: VICKI PRESIDENT