

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Myrtham
Secretary of State
200 Capitol Building, Tallahassee, FL 32304

**APPROVED
AND
FILED**

95 MAY -1 AM 8:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K64824** (1)

BEEKON ENTERPRISE INCORPORATED

Principal Place of Business: **2291 N.W. 86 STREET MIAMI FL 33147**
Mailing Address: **2291 N.W. 86 STREET MIAMI FL 33147**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
2291 N.W. 86 STREET MIAMI FL 33147		2291 N.W. 86 STREET MIAMI FL 33147		02/10/1989	02/03/1994
21. State Apt. # etc.	26. State Apt. # etc.	4. F-I-I Number	Applied For		
		65-0174468	Not Applicable		
22. City & State	27. City & State	5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
			<input type="checkbox"/> \$5.00 May Be Added to Fees		
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>		
		8. This corporation has liability for intangible tax under 1981 W.S. Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
24. City	25. State	29. City	30. State		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
EKON, BASSEY E. 2291 N.W. 86 STREET MIAMI FL 33147		b1. Name			
		b2. Street Address (P.O. Box Number is Not Acceptable)			
		b3. City			
		b4. City		FL	b5. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ETUKUDO, BASSEY 2291 N.W. 86 STREET MIAMI FL	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ETUKUDO, BASSEY	1. NAME	
STREET ADDRESS	2291 N.W. 86 STREET	1. STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	1. CITY, ST, ZIP	
TITLE	VTD EKON, CONSTANCE TALLAHA 2291 N.W. 86 STREET MIAMI FL	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ETUKUDO, BASSEY	2. NAME	
STREET ADDRESS	2291 N.W. 86 STREET	2. STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	2. CITY, ST, ZIP	
TITLE		3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY, ST, ZIP		3. CITY, ST, ZIP	
TITLE		4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY, ST, ZIP		4. CITY, ST, ZIP	
TITLE		5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY, ST, ZIP		5. CITY, ST, ZIP	
TITLE		6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY, ST, ZIP		6. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.031(4)(b), Florida Statutes. I further certify that the information made available in this annual report or supplemental annual report is true and accurate and that my corporation shall have the same legal effect as if made available by the officer or director of this corporation or the officer or director empowered to execute this report as required by Chapter 100, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *S. Myrtham* President
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4-20-95