## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 29, 2002 8:00 am Secretary of State L40090 **DOCUMENT #** 1. Entity Name KAKI, INC. Mailing Address Principal Place of Business C/O GOODMAN & BREEN C/O GOODMAN & BREEN 3838 TAMIAMI TRAIL N STE 300 3838 TAMIAMI TRAIL N STE 300 NAPLES FL 34103-3590 NAPLES FL 34103-3590 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0164018 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent \*\*\*\*\* <del>\*\*\*</del>\*\* Goodman & Breen, P.A. GOODMAN, KENNETH D. Street Address (P.O. Box Number is Not Acceptable) 3838 TAMIAMI TRAIL N 3838 Tamiami Trail N. STE 300 Suite 300 Zip Code NAPLES FL 34103-3590 City 34103 Naples 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034 (9/01) Change ☐ Addition ☐ Delete TITLE TITLE NAME HARTGE, WOLFGANG NAME 1256 ORANGE COURT STREET ADDRESS STREET ADDRESS MARCO ISLAND FL CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE VΡ TITLE NAME NAME HARTGE, KAI STREET ADDRESS STREET ADDRESS 1256 ORANGE COURT CITY-ST-ZIP MARCO ISLAND FL CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME ® HARTGE, ERIKA NAME STREET ADDRESS 1256 ORANGE COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MARCO ISLAND FL ☐ Addition Change Delete TITLE TITLE GOODMAN, KENNETH D. NAME NAME STREET ADDRESS 3838 TAMIAMI TRAIL N STE 300 STREET ADDRESS NAPLES FL 34103-3590 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 as

KUNATURE

ther like empowered

ddress