

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L87358** (2)

1. Corporation Name

RAK IMPORTS, INC.



Principal Place of Business

Mailing Address

**6522 NW 70TH ST.
SUITE 317
MIAMI FL 33166
US**

**6522 NW 70TH ST.
SUITE 317
MIAMI FL 33166
US**

3. Date Incorporated or Qualified

07/16/1990

3a. Date of Last Report

03/03/1995

2. Principal Place of Business

2a. Mailing Address

21 **8925 SW 148 ST.**

26 **8925 SW 148 ST.**

4. FEI Number

65-0206098

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **# 208**

27 **# 208**

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **MIAMI, FLORIDA**

28 **MIAMI, FLORIDA**

6. Election Campaign Financing

☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24 **33176**

25 **U.S.A.**

29 **33176**

30 **U.S.A.**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KAPAI, LAVINA
2335 MERIDIAN AVE
MIAMI BEACH FL 33140**

81 Name

KAPAI, LAVINA

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

13561 SW 77 CT.

83

84 City

MIAMI

FL

85 Zip Code

33156

11. Pursuant to the provisions of Sections 607.0502 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

Lavina Kapai

PRESIDENT

4-25-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD
KAPAI, LAVINA
STREET ADDRESS
2335 MERIDIAN AVE.
CITY - ST - ZIP
MIAMI BEACH FL**

TITLE ☐ DELETE

NAME **DVP
KAPAI, SURESH
STREET ADDRESS
2335 MERIDIAN AVE.
CITY - ST - ZIP
MIAMI BEACH FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME **PRESIDENT
KAPAI, LAVINA
13561 SW 77 CT.
MIAMI, FL 33156**

2.1 TITLE ☒ Change ☐ Addition

NAME **VICE-PRESIDENT
SURESH KAPAI
13561 SW 77 CT.
MIAMI, FL 33156**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Lavina Kapai** **LAVINA KAPAI**

4-25-96 (205)278-0575

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)