

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90321 008 ***558.75

DOCUMENT # P00000012205

1. Entity Name
IKO ELECTRONIC SYSTEMS CORP.

(P)

Principal Place of Business
3500 N.W. BOCA RATON BLVD.
BAY 808
BOCA RATON FL 33431

Mailing Address
3500 N.W. BOCA RATON BLVD.
BAY 808
BOCA RATON FL 33431



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0981913**

Applied For
☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DJAMBAZKI, HRISTO
510 NW 13 ST
25
BOCA RATON FL 33486

Name **DJAMBAZKI, HRISTO**

Street Address (P.O. Box Number is Not Acceptable)
610 NW 13 st.

25

City

BOCA RATON,

FL

Zip Code
33486

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 *Hristo Dambazki*

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 \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD**
NAME **DJAMBAZKI, HRISTO**
STREET ADDRESS **610 NW 13TH STREET UNIT 25**
CITY-ST-ZIP **BOCA RATON FL 33486-2461**

☐ Delete

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☐ Change ☒ Addition

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☐ Change ☐ Addition

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 REQUIRED** *Hristo Dambazki* **7-11-02** **(561)3477466**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)