FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000040960

1. Entity Name
Limmi Inc

FILED
02 APR 26 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
455 Longboat Club Rd.	455 Longboat Club Road ap 501
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Longboat Key FL	City & State Longboat Key FL.
Zip 34228 Country USA	Zip 34228 Country USA

4. FEI Number 65-101-0309 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Kevin Druke (Attorney)

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

1432 1st Street

City Sarasota FL **FL** Zip Code 34236

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.

SIGNATURE _____
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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Emery Kechioki Kota Kechioki	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500005493075--U -05/03/02--01003--008 ****150.00 ****150.00
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: E. Kechioki Apr 23-02.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2002

~~2001~~ **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000040960

1. Entity Name

LIMNI, INC.

2002 FORM MISPLACED - PLEASE ACCEPT THIS SUBSTITUTE COPY.

Principal Place of Business	Mailing Address
455 LONGBOAT CLUB ROAD APARTMENT 501 LONGBOAT KEY FL 34228	455 LONGBOAT CLUB ROAD APARTMENT 501 LONGBOAT KEY FL 34228

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State	City & State
Country / Zip	Country / Zip

4. FEI Number 65-1010309 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DRAKE, J. KEVIN
1432 FIRST STREET
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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.

SIGNATURE: _____ DATE

(Typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent's signature required when reinstating)

9. If this corporation is eligible to satisfy its Intangible Tax requirement and elects to do so (see instructions on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
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 (if any)
D NIKIAS, HARRY 2941 CAPTIVA WAY SARASOTA FL 34231 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
D KECHRIOTIS, EMMY 455 LONGBOAT CLUB ROAD, APT. 501 LONGBOAT KEY FL 34228 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
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SIGNATURE: X Emmy Kechriotis 3-3-02 (941) 383-5409

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

EMMY KECHRIOTIS

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 12, 2002

LIMNI, INC.
455 LONGBOAT CLUB ROAD
APARTMENT 501
LONGBOAT KEY, FL 34228

SUBJECT: LIMNI, INC.
Ref. Number: P00000040960

We have received your document for LIMNI, INC. and check(s) totaling $150.00. However, your check(s) and document are being returned for the following:

The form submitted is not suitable for archiving. Please complete the enclosed form and return to our office.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Barbara Mitchell
Document Specialist

Letter Number: 502A00021927