

FILED

Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90301 001 ***150.00

09-06-2001 90301 002 ***400.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000065571

1. Entity Name
NIKA, INC.

Principal Place of Business

900 BRYAN AVENUE
LABELLE FL 33905

Mailing Address

900 BRYAN AVENUE
LABELLE FL 33905

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1034955

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

AKIN, PATTY
900 BRYAN AVENUE
LABELLE FL 33905

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

Signature, typed or printed name of registered agent and fee application

(If filer is Registered Agent, signature and fee application is required)

Date

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.(See criteria on back) ☒ *2001 Intangible Return*FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State10. 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	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	DPVS AKIN, PATTY	PO BOX 237	LABELLE FL 33975				
	T AKIN, PATTY	PO BOX 237	LABELLE FL 33975				

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(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: *Patty Akin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

18-1501

ATTACHMENT

NIKA, INC.
900 Bryan Avenue
Post Office Box 237
LaBelle, Florida 33935
(863) 674-1534 (863) 675-2075 FAX

August 15, 2001

State of Florida
Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, Florida 32302-1500

P00000065571

RE: 2001 Uniform Business Report

Dear Sirs:

Respectfully requesting consideration for the penalty assigned for the above reference report, as it was not received. The only notification received was the delinquent notice, which is herewith enclosed, along with two (2) check.. A check in the amount of \$150.00 and a check in the amount of \$400.00. If consideration can be given and the extra fee waived it would greatly be appreciated due to the hardship this penalty imposes on my newly formed small business. I would greatly appreciate any consideration that would be possible.

If you need any further information, please call (63) 674-1534 or Email me at patty777@earthlink.net.

Sincerely,

Patty Akin

Patty Akin, Owner