

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90124 020 ***150.00

DOCUMENT # **P00000105412**

1. Entity Name

KOATIK STYLES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2702 E BUSCH BLVD

Suite, Apt. #, etc.

Tampa, FL

City & State

3. Mailing Address

2702 E BUSCH BLVD

Suite, Apt. #, etc.

Tampa, FL

City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number

593679982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Arnim Elie

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

7201 Five Point Cr.

City

Tampa, FL

FL

Zip Code

33634

**DO NOT WRITE
IN THIS SPACE**

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 \$350.00

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	OWNER ARNIM ELIE 7201 Five Point Cr. Tampa, FL 33634
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/26/02 (813) 931-1349

CR2E034B (12/01)

Attachment
700600105412
124979

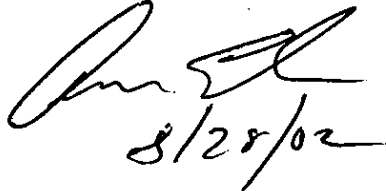
Koatik Styles
Tint Alarms Stereos
2702 E. Busch Blvd.
Tampa FL, 33614
(813) 931-1349

To Whom it may concern : Kathy Ashton

I am the owner of Koatik Styles Inc., I sincerely apologize for the following past due payment. In light of recent events , such as repeated brake-in's , unknown thefts , as well as a family emergency in wich I had to leave the state , for well over a month. We have also moved locations in the last year , to our current address. I sincerely hope you except my apology. Enclosed along with my many apologies , I have sent payment in the amount of \$150.00. Please overlook this matter ,your company need not worry of a repeat incident.

Sincerely,

Arnim Elie



8/28/02