

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000076355

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: MONIKA KOZAKOVA, INC.

Current Principal Place of Business:

4378 PARK BLVD
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

4378 PARK BLVD
PINELLAS PARK, FL 33781

New Mailing Address:

FEI Number: 59-3735347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAWRON, MARY
19321 C US HWY 19 N STE 601
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

GAWRON, MARY
4378 PARK BLVD
PINELLAS PARK, FL 33781 US

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: MARY GAWRON

04/23/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KOZAKOVA, MONIKA
Address: 1005 ELBERTA ROAD APT 20
City-St-Zip: WARNER ROBINS, GA 31093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOZAKOVA, MONIKA
Address: 1814 OLD AXSON RD LOT #8
City-St-Zip: DOUGLAS, GA 31535

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONIKA KOZAKOVA

P

04/23/2002

Electronic Signature of Signing Officer or Director

Date