FILED

Apr 01, 2002 8:00 am Secretary of State P01000104005 **DOCUMENT #** 1. Entity Name 04-01-2002 90666 045 ***150 00 LETKO CORPORATION Principal Place of Business Mailing Address 14 1/2 N. EVERGREEN AVENUE 14 1/2 N. EVERGREEN AVENUE **CLEARWATER FL 33755 CLEARWATER FL 33755** 3. Mailing Address 2. Principal Place of Business 2690 2690 Drew St. Drew Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE # 718 #718 City & State 4. FEI Number City & State Applied For Clearwater, FL FL Clearwater 59-3750830 Not Applicable ^{Zip}33759 Country \$8.75 Additional 5. Certificate of Status Desired 33759 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LETKO MILAN LETKO, MILAN Street Address (P.O. Box Number is Not Acceptable) 14 1/2 N. EVERGREEN AVENUE **CLEARWATER FL 33755** #718 2690 Drew Zip Cod 759 8. The above named entity of bmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. LETKO, PRESIDENT Signature, typed or printed name of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12, Ð CR2E034 (9/01) TITLE Delete TITLE K Change ☐ Addition LETKO HILAN LETKO, MILAN NAME NAME 2690 Drew Street #718 STREET ADDRESS 14 1/2 N. EVERGREEN AVENUE STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33755** CITY-ST-ZIP Olearwater, Fi 38759 Change TITLE ☐ Delete TITLE Addition Letkova Jaroslava NAME LETKOVA, JAROSLAVA 2690 Drew Street #718 STREET ADDRESS STREET ADDRESS 14 1/2 N. EVERGREEN AVENUE Clearwater, Fi CITY-ST-ZIP **CLEARWATER FL 33755** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition LETKO HAREK 2690 Drew Street #930 NAME LETKO, MAREK NAME STREET ADDRESS STREET ADDRESS 14 1/2 N. EVERGREEN AVENUE CITY-ST-ZIP Clearwater, FL 33759 CITY-ST-ZIP **CLEARWATER FL 33755** ☐ Delete TITLE Change Addition TITLE Lethora NAME NAME LETKOVA, RENATA 2090 Drew Street #340 STREET ADDRESS STREET ADDRESS 14 1/2 N. EVERGREEN AVENUE CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33755** Clearwater, FL 33759 TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ТЛІ F Change ☐ Addition NAME: NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

... Milan (727) 669-8594 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

igh an address, with all other like empowered.

changed, or on an attachmen