

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAR 19 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000005755



1. Entity Name
~~VANKINE, INC.~~

VAKNINE, INC.

Principal Place of Business
13668 FOLKSTONE CIRCLE
WELLINGTON, FL 33414

Mailing Address
13668 FOLKSTONE CIRCLE
WELLINGTON, FL 33414

2. Principal Place of Business

13668 FOLKSTONE Ct.

3. Mailing Address

13668 Folkstone Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Wellington, FL

City & State

Wellington

4. FEI Number

80-0023725

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~VAKNINE, TAMMAY M~~
13668 FOLKSTONE CIRCLE
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name VAKnine, ELan
Street Address (P.O. Box Number is Not Acceptable)

13668 Folkstone Ct.

City Wellington,

FL

Zip Code 33414

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Elan Vak

3/14/03

Signature, typed or printed name of registered agent and date (if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

FILED WITH FEE IS \$160.00

After May 1, 2003 Fee will be \$500.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP	☒ Delete
NAME	VAKNINE, TAMMAY M.	
STREET ADDRESS	13668 FOLKSTONE CIRCLE	
CITY-ST-ZIP	WELLINGTON, FL 33414	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☐ Change ☒ Addition
NAME	ELAN VAKnine	
STREET ADDRESS	13668 Folkstone Ct	
CITY-ST-ZIP	Wellington, FL 33414	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elan Vak

3/14/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

3/15