

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90224 012 ***150.00

DOCUMENT # P02000021157

1. Entity Name
IPK, INC.



Principal Place of Business
**4159 VANERN WAY
KISSIMMEE FL 34746**

Mailing Address
**4159 VANERN WAY
KISSIMMEE FL 34746**



2. Principal Place of Business
776 W. PINWOOD CT
Suite, Apt. #, etc.

3. Mailing Address
776 W PINWOOD CT
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
LAKE MARY

City & State
LAKE MARY

4. FEI Number
90-0017806

Applied For
Not Applicable

Zip
32746 Country
USA

Zip
32746 Country
USA

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

6. Name and Address of Current Registered Agent

**COHN, SCOTT E
315 S E 7TH STREET
SECOND FLOOR
FT. LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name
DAVID MICKELSEN

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

776 W. PINWOOD CT

City
LAKE MARY

FL

Zip Code
32746

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/10/03

FILE NOW!!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D MICKELSEN, DAVID
4159 VANERN WAY
KISSIMMEE FL 34746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D MICKELSEN, JOANNE
4159 VANERN WAY
KISSIMMEE FL 34746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**776 W. PINWOOD COURT
LAKE MARY FL 32746** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**776 W PINWOOD COURT
LAKE MARY FL 32746** ☒ Change ☐ Addition

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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/03

Date

Daytime Phone #

**407 339 3144 WK
407 361 7418 CBL**

CR2E034 (10/02)