

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90013 048 ***150.00

DOCUMENT # P02000034423

1. Entity Name
EXPRESS ENGRAVING USA, INC.



Principal Place of Business
**12404 BISCAYNE BLVD.
MIAMI, FL 33181**

Mailing Address
**12404 BISCAYNE BLVD.
MIAMI, FL 33181**

34018453

2. Principal Place of Business

251 NE 166 STREET

Suite, Apt. #, etc.

3. Mailing Address

251 NE 166 STREET

Suite, Apt. #, etc.



01072004 Chg-P CR2E034 (10/03)

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

03-0423637

Applied For

Not Applicable

Zip

33162

Country

US

Zip

33162

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**ZAJAC, ALEJANDRO
3750 WEST FLAGLER STREET
MIAMI, FL 33134**

7. Name and Address of New Registered Agent

Name
DANIEL KAHANOVSKY
Street Address (P.O. Box Number is Not Acceptable)
251 NE 166 ST

City
MIAMI

FL

Zip Code
33162

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: **X** **DANIEL KAHANOVSKY**

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

(NOTE: Registered Agent signature required when reinstating)

01/07/04

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
D
NAME
KAHANOVSKY, DANIEL ☐ Delete
STREET ADDRESS
12404 BISCAYNE BLVD.
CITY-ST-ZIP
MIAMI, FL 33181

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**251 NE 166 ST
MIAMI FL 33162**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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: **X** **DANIEL KAHANOVSKY**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/07/03 **1305/919-9666**
Date Daytime Phone #