2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

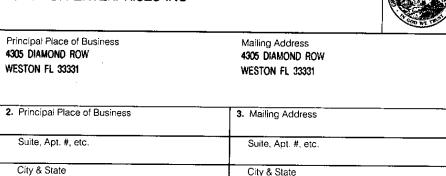
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1.

Zip



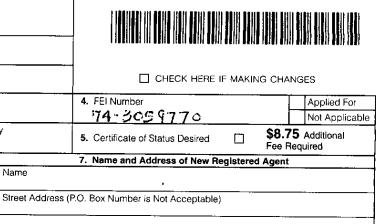
. Entity Name OKEMON ENTERPRISES INC		
rincipal Place of Business 305 DIAMOND ROW	Mailing Address 4305 DIAMOND ROW	
ESTON FL 33331	WESTON FL 33331	



Zip

FILED				
Jan 09, 2003 8:00 am				
Secretary of State				

01-09-2003 90063 001 ***150.00



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8.	The above named entity submits this statement for the purpose of changing its registered	ed office or registered agent, or both, in the State of Florida	Lam familiar with, and appoint
	the obligations of registered agent.	or officer of agent, or both, in the state of horida.	ram rammar with, and accept

Country

Name

City

SIGNATURE

TOKAR, DANIEL J

4305 DIAMOND ROW WESTON FL 33331

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

6. Name and Address of Current Registered Agent

Country

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Zip Code

10.	OFFICERS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	P TOKAR, DANIEL J 4305 DIAMOND ROW WESTON FL 33331	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS 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:

DANIEL J TOKAR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR