

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

7/18/2003

FILED
Aug 01, 2003 8:00 am
Secretary of State

07-18-2003 90077 032 ***150.00

DOCUMENT # P02000130656

i. Entity Name
JNNICK INC.



Principal Place of Business
9588 GRIFFIN ROAD
COOPER CITY FL 33328

Mailing Address
9588 GRIFFIN ROAD
COOPER CITY FL 33328

55053035

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

06-1665004

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NICK, DAMIANO
430 COMMODORE DRIVE
216
PLANTATION FL 33325

Name

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

City

FL

Zip Code

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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

351

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

CR2E034 (4/03)

TITLE P
NAME FOSTER, UNDA
STREET ADDRESS 430 COMMODORE DR
CITY-ST-ZIP PLANTATION FL 33325

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME DAMIANO, NICK
STREET ADDRESS 430 COMMODORE DR #216
CITY-ST-ZIP PLANTATION FL 33325

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-17-03

Date

Daytime Phone #

Attachment#

LINNICK INC.
9588 Griffin Road
Cooper City, Florida 33328
(954) 437-1754

55053035

#P02000130456

July 30, 2003

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: P02000130656 / Correspondence dated July 22, 2003

To Whom It May Concern:

Please find enclosed the letter that you sent to me as well as our annual business report. I called your 800 and explained to one of your representatives that I never received any notice for my 2003 annual report before the letter dated July 22, 2003.

I was told to write you this letter explaining my situation to you; additionally I sent you a check in the amount of One Hundred and Fifty Dollars...(\$150.00 Check No. 1380) which was cashed by your office, I sent this check to you on July 16, 2003.

I am therefore respectfully requesting that your office waive the additional amount due of Four Hundred Dollars (\$400.00) for the reasons mentioned above.

Your cooperation and assistance in the above matter is greatly appreciated. Should you have any questions, or if I may be of any assistance, please feel free to call.

Thank you,



Linda Foster
Linnick Inc.
9588 Griffin Road
Cooper City, Florida 33328
(954) 437-1754