2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003422

Entity Name: UKINOXUSA KITCHEN SYSTEMS, INC

FILED May 13, 2008 Secretary of State

Littly Nai	ile. OKINOXC	JOA KITCHEN STOTEWO, INC.						
Current Principal Place of Business:				New Principal Place of Business:				
5601 POWERLINE ROAD				5601 NORTH POWERLINE ROAD				
105 FT.LAUDERDALE, FL 33309				105 FT.LAUDERDALE, FL 33309				
Current Mailing Address:				New Mailing Address:				
5601 POWERLINE ROAD				5601 NORTH POWERLINE ROAD				
105 FT.LAUDERDALE, FL 33309				105 FT.LAUDERDALE, FL 33309				
FEI Number:	: 14-1866554	FEI Number Applied For ()	FEI Number	Not Appl	icable ()	Certifica	te of Status Des	sired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
HOCAOGLU, MEHMET 19555 EAST COUNTRY CLUB DRIVE 207				HOCAOGLU, MEHMET 19555 EAST COUNTRY CLUB DRIVE 306				
AVENTURA, FL 33180 US				AVENTURA, FL 33180 US				
	named entity s e of Florida.	submits this statement for the pu	urpose of ch	anging i	ts registered	l office or re	egistered age	nt, or both,
SIGNATURE: MEHMET HOCAOGLU				05/13/2008				
Electronic Signature of Registered Agent							Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the p	rior notic	e.			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	HOCAOGLU, M	Delete EHMET PRESDNT DUNTRY CLUB DRIVE #306 33180 US				()Change(() Addition	
Title: Name: Address: City-St-Zip:	HOCAOGLU, Y	DUNTRY CLUB DR. #207				()Change(() Addition	
Title: Name: Address: City-St-Zip:	()	Delete			HOCAOGLU,	COUNTRY C	· /	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MEHMET HOCAOGLU PRES 05/13/2008