## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000003422

Name:

Address: City-St-Zip: HOCAOGLU, MEHMET A TRES

AVENTURA, FL 33180

19555 EAST COUNTRY CLUB DR #207

Entity Name: UKINOXUSA KITCHEN SYSTEMS, INC

FILED Mar 23, 2009 Secretary of State

Littly Nai	ile. OKINO	ROSA RITCHEN STSTEMS, INC	٠.		
Current Principal Place of Business:				New Principal Place of Business:	
5601 NORTH POWERLINE ROAD 105				5601 POWERLINE ROAD 105	
FT.LAUDERDALE, FL 33309				FT.LAUDERDALE, FL 33309	
Current Mailing Address:				New Mailing Address:	
5601 NORTH POWERLINE ROAD				5601 POWERLINE ROAD	
105 FT.LAUDERDALE, FL 33309				105 FT.LAUDERDALE, FL 33309	
FEI Number:	14-1866554	FEI Number Applied For ( )	FEI Nur	nber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
HOCAOGLU, MEHMET 19555 EAST COUNTRY CLUB DRIVE 306				HOCAOGLU, MEHMET 19701 EAST COUNTRY CLUB DR 203	
AVENTURA, FL 33180 US				AVENTURA, FL 33180 US	
The above in the State		y submits this statement for the p	purpose o	of changing its registered	d office or registered agent, or both,
SIGNATURE:				03/23/2009	
Electronic Signature of Registered Agent				Date	
Election Can	npaign Financ	ing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HOCAOGLU, 19555 EAST	( ) Delete MEHMET PRESDNT COUNTRY CLUB DRIVE #306 FL 33180 US		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	HOCAOGLU,	( ) Delete YAVUZ VICE PR COUNTRY CLUB DR. #207 FL 33180		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title:	MR	( ) Delete		Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MEHMET HOCAOGLU MR 03/23/2009