

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000136575

Entity Name: KOKETA DESIGNS INC.

FILED
Jul 05, 2007
Secretary of State

Current Principal Place of Business:

6960 NW 50TH STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

6960 NW 50TH STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 20-8274578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTELINE, ANA M
9262 SW 146 CT
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOTERO, MARIA A
Address: 14464 SW 96 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: GARCIA, JAROMIR J
Address: 10481 SW 62 ST
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: GARCIA, ERIKA
Address: 9262 SW 146 CT
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: GARCIA, ANA C
Address: 9262 SW 146 CT
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: GARCIA, JAROMIR C
Address: 9262 SW 146 CT
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: CASTELINE, ANA M
Address: 9262 SW 146 CT
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANA CASTELINE

D

07/05/2007

Electronic Signature of Signing Officer or Director

Date