2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9300004950 1. Entity Name BMK INVESTMENTS, INC.

Principal Place of Business

Mailing Address

Time part lace of business waining Address												
5211 S WASHIN TITUSVILLE FL			5211 S WASHINGTON AVE TITUSVILLE FL 32780				- ~ * → •					
2. Principal P	lace of Busine	ess	3. Mailing Address									
11 A Suite, Apt.	Max Br #, etc.	ewer Pkwy.	11 A. Max Brewer Pkwy. Suite, Apt. #, etc.			Y • · ·	DO NOT WRITE IN THIS SPACE					
Suite	В		Suite B									
City & State	e		City & State			4.	El Number	59-3220	00E		Applied For	
Titusville Florida			Titusville Florida			a l		35 3220	3 23		Not Applicable	
Zip	Zip Country		Zip . Countr		ntry	E Contificate of C		Out - Barin		\$8.75 A	dditional	
327	32796USA		32796	_	USA	5. (5. Certificate of Status Desired			Fee Requi		
6. Name and Address of Current							7. Name and Address of New Registered Agent					
			Name									
INOCHOVSKY, ROMAN 8814 BAY HARBOUR BLVD					Street Address (P.O. Box Number is Not Acceptable)							
	ANDO FL 32											
				City			FL Zip Code					
8. The above	named entity	submits this statement for	the purpose of changing its	register	ed office or	registered ag	ent, or both,	in the State of	Florida.		:	
SIGNATURE	Signature, typed o	or printed name of registered agent ar	d title if applicable. (NOTE	: Registere	ed Agent signatu	re required when re	einstating)		DATE			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FE					IS \$150 f	no	[
			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00				1	on Campaign			.00 May Be	
Tax filing requirement and elects to do so. (See criteria on back)			Make Check Payable to Department of Sta				Trust	Fund Contribu	ution.	Add	led to Fees	
		<u>"</u>			·		DITIONS (CI	IANOEC TO C	NEELOE DC	ID DIOCOTO	OC (NI 11	
11.		OFFICERS AND D		12.	- 1	AL	IDITIONS/CI	HANGES TO C	JEFICERS AN			
TITLE	P	-	☐ Delete	TITL						☐ Change	e	
NAME		SKY, ROMAN		NAM	1							
STREET ADDRESS	8814 BAY	HARBOUR BLVD			EET ADDRESS							
CITY-ST-ZIP	ORLANDO	FL 32836		CITY	′-ST-ZIP							
TITLE	Τ		☐ Delete	TITL	E					🔀 Change	e 🔲 Addition	
NAME	PORTER,	VIRGINIA		NAM	1E							
STREET ADDRESS		ASHINTON AVE		STRE	EET ADDRESS	11 A	Mass E	22222	Dlezzz	Cuit	- D	
CITY-ST-ZIP	TITUSVILLE FL 32780		CITY		-ST-ZIP	TI A.	A. Max Brewer Pkwy., Suite B				te b	
TITLE	THOSVILL	ETE SZIOU	- Delete	1171	Ε	Titus	ville,		3 <i>2-1</i> 96—	Change	e	
TITLE	, -		→ 🚅 Delete	I TITLE			1.77		-	Onlings	S	
NAME	i			ì	j						ł	
STREET ADDRESS					EET ADDRESS							
CITY-ST-ZIP				CITY	/-ST-ZIP							
TITLE	ı		☐ Delete	TITL	E					Change	e 🗌 Addition	
NAME				NAM	1E							
STREET ADDRESS				STRE	EET ADDRE\$\$							
CITY-ST-ZIP				CITY	'-ST-ZIP							
TITLE			☐ Delete	TITL	E					☐ Change	e 🔲 Addition	
NAME			50,010	/ NAM							_	
STREET ADDRESS					EET ADDRESS							
CITY-ST-ZIP					-ST-ZIP							
				-1								
TITLE			☐ Delete	TITL						☐ Change	e 🗌 Addition	
NAME				NAM								
STREET ADDRESS				STRE	EET ADDRESS							

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

Roman Inochovsky

2-8-01

321.383-2115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ite Daytime Pho

FILED

Feb 13, 2001 8:00 am Secretary of State

02-13-2001 90059 004 ***150.00

CR2E034 (10/00