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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000021720 (6)

KASIK & KASIK COMPANY, INC.

FILED May 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1811 SANFORD CIRCLE 1811 SANFORD CIRCLE SARASOTA FL 34234 SARASOTA FL 34234 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/18/1993 2. Principal Place of Business (ICLF 4. FEI Number Applied For Mailing Address
1811 SANFOLD CIRCLE 65-0395160 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$1115071, F11. \$5.00 May Be 6. Election Campaign Financing S1115071, F11. 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent **B1** Name ZABOLOTNY, STEVE 8800 49TH STREET NORTH 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 406-5** 83 PINELLAS PARK FL 34666 84 Zip Code City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change Addition 1.1 TITLE TITLE KASIK JAN 1.2 NAME NAME 216 SERENA VILLAS DR 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 2.1 THTLE Сћалре TITLE NAME KASIK KAROL 2.2 NAME STREET ADDRESS 216 SERENA VILLAS DR 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE KASIK, PAVOL 3.2 NAME NAME **1811 SANFORD CIRCLE** STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change ☐ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on aprattacyment with an address.

SIGNATURE: