

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

96 JAN 23 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000033209 (6)

1. Corporation Name

SANKO, INC.

Principal Place of Business

631 E. DANIA BEACH BLVD.  
DANIA FL 33004

Mailing Address

631 E. DANIA BEACH BLVD.  
DANIA FL 33004

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

KIRIAKO, SHIRLEY  
211 S OCEAN DR #404  
HOLLYWOOD FL 33019

3. Date Incorporated or Qualified

05/06/1993

3a. Date of Last Report

01/19/1995

4. FEI Number

65-0411028

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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 provisions of, Section 607.1505, Florida Statutes.

SIGNATURE

Signature of new or existing registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

17 JAN 96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition

NAME PD  
KIRIAKO, SHIRLEY  
STREET ADDRESS 211 S OCEAN DR #404  
CITY-ST-ZIP HOLLYWOOD FL

1.2 NAME JOHN KIRIAKO  
1.3 STREET ADDRESS 3200 N. PORT ROYALE DR #510  
1.4 CITY-ST-ZIP FT LAUDERDALE, FL 33308

TITLE ☐ DELETE

2.1 TITLE SEC/TREAS ☐ Change ☒ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.2 NAME WILLIAM KIRIAKO  
2.3 STREET ADDRESS 810 S. PARK ROAD #1-218  
2.4 CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17 JAN 96 (954) 925-4594

Date Day/Minute Phone #

CR2E034 (12/95)