FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -) AM 10:21

SEC[illegible] STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000084038 (7)

1. Corporation Name

LIKO Incorporated

Principal Place of Business	Mailing Address
Partenkirchener St. 12 Ohlstadt, Bavaria, Germany	Partenkirchener St.12 Ohlstadt, Bavaria, Germany

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12.03.1993
3a. Date of Last Report: 2.21.1994

2. Principal Place of Business
21 625 Oak St.
Suite, Apt. #, etc
22 Apt. A
City & State
23 Boynton Beach, Fl.
Zip 24 33435 Country 25 Palm Beac

2a. Mailing Address
26 625 Oak St. Apt. A
Suite, Apt. #, etc
27 Boynton Beach, Fl.
City & State
28
Zip 29 33435 Country 30 Palm Beach

4. FEI Number: 65-0492359 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

9. Name and Address of Current Registered Agent

Blaise Picchi, P.A.
Attorney at Law
1326 Southeast 3rd Ave.
Fort Lauderdale, Florida 33316

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE C NAME STREET ADDRESS CITY ST ZIP	Elisabeth C. Koller Partenkirchener St. 12 Ohlstadt, Bavaria, Germany 82441	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP	☐ Change ☐ Addition
TITLE P NAME STREET ADDRESS CITY ST ZIP	Elisabeth C. Koller	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP	☐ Change ☐ Addition 800001475328 -05/04/95--01035-005
TITLE S NAME STREET ADDRESS CITY ST ZIP	Elisabeth C. Koller	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP	☐ Change ☐ Addition ****200.00 ****200.00
TITLE T NAME STREET ADDRESS CITY ST ZIP	Elisabeth C. Koller	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP	☐ Change ☐ Addition BMS 5-2

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)(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 an attachment with an address.

SIGNATURE: Elisabeth C. Koller President Elisabeth C. Koller 4.18.1995 (407)737-0891
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #