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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000084038

1. Corporation Name

STREET ADDRESS

LIKO, INC	CORPORATED					·				
Principal Place	of Business	Mailing Address					AR IRING (IIII) ORAII A		INII OINIE BUINN	H101 /81/ 1801
·		625 OAK STREET								
625 OAK STREE BOYNTON BEAC		BOYNTON BEACH			}					
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					[]	Date Incorpor				. }
						12/03/199	3			
2. Principal Pt	lace of Business	2a. Mailing Addr	ess			4. FEI Number			Apı	plied For
21		26				<u>65-049235</u>	9		Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.			5. Certifcate of S	Status Desired		\$8.75 A	I
22	<u></u>	27	<u> </u>						Fee Re	 -
City & State	e	City & State				6. Election Cam			\$5.00	
23		28				Trust Fund Co			Added to	o Fees
Zip	Country	Zip	·	Country		8. This corporati		rent year Int		□No
24	25	29	30	<u> </u>		Personal Prop 0. Name and A		Do alotorod		L1140
	9. Name and Address of Curre	nt Registered Agent		81 Nam		0. Name and A	daress of New	Registered /	Agent	
DI AI	SE PICCHI, P.A.			01 144	"Æ //	isabe	th C	· 50	> LLE	<i>FR</i>
	S.E. 3RD AVENUE			82 Stree	et Address	(P.O. Box Numb	er is Not Accen	able)	+ 1	1. # A
	T LAUDERDALE FL 33316			00	6-2	5 Ua	<u> </u>	7100	2 / <i>H</i>	71
FUR	I LAUDENDALE PL 33316			83		•			•	
				84 City	Boy	nton.	Beac	ん FL	85 Zip C	Code 3435
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Flor	ida Statutes, t	the above-name	ed corporat	ion submits this	statement for the	purpose of	changing its	registered
office or r	paietered agent or both in the State	of Florida Such char	ide was autho	orized by the co	rporation's	board of director	's. I hereby acce	ept the appoi	ntment as reg	gistered
propt La	m familiar with and accept the obliga	ations of Section 607.	0505. Florida	Statutes.						
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.	0505, Florida	Statutes.	. Woll	اور				
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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 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 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. ed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90066 050 ***150.00