FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

12265 GUERTIN

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400003400

1. Corporation Name

1650 NE 26TH ST

MORIKA, INC.

Principal Place of Business

FILED May 10, 1999 8:00 am Secretary of State 05-10-1999 90213 005 ***150.00



1415 EAST SUNRISE BLVD. FT LAUDERDALE FL 33305 US			1415 EAST SUNRISE BLVD. MONTREAL QU H4J1V			DO NOT WRITE IN THIS SE	PACE		
		ÜS	THERE GO THOTT			3. Date Incorporated or Qualifed			
						01/13/1994			
2. Principal F	Place of Business	2a.	Mailing Address			4. FEI Number	App	olied For	
21		26	26			65-04617 <u>85</u>	Not	Applicable	
	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A		
City & Sta	City & State		City & State			6. Election Campaign Financing	\$5.00	. ,	
23 Zin	Country	28	7in	Countr		Trust Fund Contribution	Added to	rees	
Zip	25	20	Zip Countr			8. This corporation owes the current year Intangible Personal Property Tax.			
24	9. Name and Address of Curre			30		10. Name and Address of New Registered Ag			
 	9. Name and Address of Curre	ent Keğis	tereu Agent	81	Name		, o		
TAINTOR, F. ANDREWS									
1750 EAST SUNRISE BLVD.			82 Street Add		Stree	Address (P.O. Box Number is Not Acceptable)			
BAN	ikatlantic (Tower) BLVD., Th	HIRD FLO	OOR	83					
FOR	IT LAUDERDALE FL 33304			Ľ					
				84	City	FL	85 Zip C	ode	
11. Pursuant	to the provisions of Sections 607.05	02 and 60	07.1508, Florida Statute	s, the abov	e-name	corporation submits this statement for the purpose of ch	anging its	registered	
office or i	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florid sations of,	la. Such change was au . Section 607.0505, Flori	itnorized by ida Statute:	tne corp s.	oration's board of directors. I hereby accept the appointment	nent as reg	listered	
SIGNATURE			,						
SIGNATURE	Signature, typed or printed name of registered ag	gent and title i	if applicable. (NOTE:	Registered Age	nt signature	required when reinstating) DATE			
12.	OFFICERS A	ND DIRE	CTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12	
TITLE	PS		☐ DELETE	1.1 TITLE			Change	Addition	
TITLE NAME	JOYAL-ROY, LORRAINE			_					
	JOYAL-ROY, LORRAINE 12265 GUERTIN			1.1 TITLE 1.2 NAME	T ADORESS	Director			
NAME	JOYAL-ROY, LORRAINE		☐ DELETE	1.1 TITLE 1.2 NAME		Director	Change	Addition	
NAME STREET ADDRESS	JOYAL-ROY, LORRAINE 12265 GUERTIN			1.1 TITLE 1.2 NAME 1.3 STREE		Director			
NAME STREET ADDRESS CITY-ST-ZIP	JOYAL-ROY, LORRAINE 12265 GUERTIN		☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5		President Secretary	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	JOYAL-ROY, LORRAINE 12265 GUERTIN MONTREAL CA		☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-3 2.1 TITLE 2.2 NAME		President Securery Jayat Daniel 280 Glenaanu	Change	Addition	
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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 an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR