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CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P94	00004	5308	(1) VOK
R - K - Co	ایما جی	1 tants	, Inc.	-	

FILED
May 10, 1999 8:00 am
Secretary of State
05-10-1999 90279 031 ***150.00

9. Name and Address of Current Registered Agent Mullin, James G. Rafon Blud, # 205 82 Street Address (P.O. Box Number is Not Acceptable) 130 (A. Rafon Fl 33431 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, am familiar with, and accept the obligations of. Section 607.0505. Florida Statutes SIGNATURE Signature, typed or printed name of registered agent and title if applicable. [NOTE: Registered Agent signature required when remistating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE	1. Corporation Name R. K. Consultants, Inc.				
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9. Name and Address of Current Registered Agent Mullin, JAMS G. Arbon Blud, # 201 Bock Rahon Ft 33 43 1 Ba City FL 85 Zio Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Flonds Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am finding with, and cacept the obligations of Section 607 0505. Flonds Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am finding with, and cacept the obligations of Section 607 0505. Flonds Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I am finding with, and cacept the obligations of Section 607 0505. Flonds Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I am finding with, and cacept the obligations of Section 607 0505. Flonds Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I am finding with, and cacept the obligations of Section 607 0505. Flonds Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I am finding with, and cacept the obligations of Section 607 0505. Flonds Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent. I am finding with, and cacept the appointment as registered agent. I am finding with, and cacept the appointment as registered agent. I am finding with, and cacept the displaced agent. I am finding with, and cacept the provisions of change and cache the provisions of change and cache the provisions of change and cache the provisions of cache		Country	8. This corporation owes the current year In		
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Bock Rafou Blvd, #205 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			10. Name and Address of New Registered	d Agent	
Bock	Mullin James 6.	81 Name			
Bock	2763 NW BOCA RAFON Blud, # 201	82 Street Addre	ess (P.O. Box Number is Not Acceptable)		
Section Sect	2003		 		
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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, or hold agent and manual man	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,	the above-named corpo	oration submits this statement for the purpose of	of changing its	registered
SIGNATURE Signature, typed or protect name of regulared agent and list if approxime	office or registered agent, or both, in the State of Florida. Such change was auth	norized by the corporatio	on's board of directors. I hereby accept the appoint	ointment as reg	gistered
Signature regent on printed carrier and table a appulations NOTE: Registered Appel appulation required when remailability APPEL		<u> </u>			
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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 of 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, of on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #