

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000083588 (1)

1. Corporation Name

UK AND U CORPORATION

Principal Place of Business

15324 SW 72ND ST #14
MIAMI FL 33193

Mailing Address

15324 SW 72ND ST #14
MIAMI FL 33193

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1994

3a. Date of Last Report

2. Principal Place of Business

21 17730 S.W. 175 ST
Suite, Apt. #, etc.

2a. Mailing Address

26 17730 S.W. 175 ST
Suite, Apt. #, etc.

4. FEI Number

65-0533954

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. 198.032,
Florida Statutes



Yes ☒ No

22 City & State

23 Miami, FL

24 Zip

33187

25 Country

USA

27 City & State

28 Miami, FL

29 Zip

33187

30 Country

USA

9. Name and Address of Current Registered Agent

EUSTAQUIO, ULISES A
15324 SW 72ND ST #14
MIAMI FL 33193

10. Name and Address of New Registered Agent

81 Name

EUSTAQUIO, ULISES A

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

17730 S.W. 175 ST.

83

84 City

Miami

FL

85 Zip Code

33187

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

Ulises A. Eustaquio

(NOTE: Registered Agent signature required when mandating)

DATE

2/15/95

12. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	EUSTAQUIO, ULISES A
STREET ADDRESS	15324 SW 72ND ST #14
CITY - ST - ZIP	MIAMI FL 33193
TITLE	DVS
NAME	EUSTAQUIO, KATTYA C
STREET ADDRESS	15324 SW 72ND ST #14
CITY - ST - ZIP	MIAMI FL 33193
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DPT	☒ Change ☐ Addition
1.2 NAME	EUSTAQUIO, ULISES A.	
1.3 STREET ADDRESS	17730 S.W. 175 ST	
1.4 CITY - ST - ZIP	Miami, FL 33187	
2.1 TITLE	DVS	☒ Change ☐ Addition
2.2 NAME	EUSTAQUIO, KATTYA C.	
2.3 STREET ADDRESS	17730 S.W. 175 ST.	
2.4 CITY - ST - ZIP	Miami, FL 33187	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
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 110.07(3)(a), 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:

Ulises A. Eustaquio

SIGNATURE AND TYPED OR PRINTED NAME OF AGING OFFICER OR DIRECTOR

2/15/95

Date

305 2528403

Telephone (Area)