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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500002348 (7)

KOVINA CORPORATION

Principal Place of Business 6101 NW 43RD WAY COCONUT CREEK FL 33073

Mailing Address

6101 NW 43RD WAY COCONUT CREEK FL 33073-3267

FILED Jan 15 1997 8:00am Secretary of State



| | | | | | | 01/06/1995 | | ate of Last F 30/1996 | ероп |
|--|---|------------------------|--|---|----------------|--|------------|---------------------------------|-----------------------------|
| 2. Principal P | lace of Business | 2a. Mailing Addre | SS | | | 4. FEI Number | | | oplied For |
| 21 | | 26 | | | i | 65-0546764 | | <u> </u> | ot Applicable |
| Suite, Apt | #, etc. | Suite, Apt #, (| etc | | | 5. Certificate of Status Desired | | • | Additional equired |
| City & State | o . | City & State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | Country | 7 (p) | Cc | ountry | | 8. This corporation has liability for | intannible | | |
| 24 | 25 | 29 | 30 | | ĺ | | | No. | . 100.002., |
| | Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New R | egistered | Agent | |
| BUE | NO, ERICO | | | 81 Nar | ne | | | | |
| 6101 NW 43RD WAY | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| COCONUT CREEK FL 33073 | | | or Siree | | set Addies | Address (F.O. Box Number is Not Acceptable) | | | |
| | | | | 83 | | | | | |
| | | | | 24 0 | | | | | |
| | | | | 64 City | f | | FL | 85 Zip | Code |
| onice or re | to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga | oi Fioridal Such chand | ie was authoriz | ed by the c | ed corporation | ation submits this statement for the 's board of directors. I hereby acce | purpose o | changing in ointment as | ts registered registered |
| SIGNATURE | <u> </u> | | | | | | | | |
| 12. | Signature, typed or protect name of region is oragi- OFFICERS AND | | (NOTE Flagrater | | lure required | | DATE | | |
| TITLE | P | DEL | FTF 11 | : TITLE | · | ADDITIONS/CHANGES TO OFFI | CEHS AND | Change | |
| NAME | BUENO, ERICO | occ | | | | | | L_1 Change | Addition |
| | | | | 4168 AT | | | | | |
| | | | | NAME | | | | | |
| STREET ADDRESS | 6101 NW 43RD WAY | | 1.3 | STREET ADDRES | SS | | | | |
| STREET ADDRESS CITY+ST-ZIP | | I DEL | 1.3 | STREET ADDRES | SS | | | | |
| STREET ADDRESS CITY+SI-ZIP TITLE | 6101 NW 43RD WAY | ☐ DEL | 1.3 1.4) ETE 2.1 | STREET ADDRES CITY-ST-ZIP TITLE | SS | | | Change | Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME | 6101 NW 43RD WAY | DEL | 1.3: 1.4 FTE 2.1: 2.2: | STREET ADDRES CITY-ST-ZIP TITLE NAME | | | | Change | Addition |
| STREET ADDRESS CITY+S1-ZIP TITLE NAME STREET ADDRESS | 6101 NW 43RD WAY | DEL | 1.33 1.44 ETE 2.11 2.21 2.33 | STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADORES | | | | Change | ☐ Addition |
| STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP | 6101 NW 43RD WAY | | 1.3: 1.4: ETE 2.1: 22: 23: 24: | STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADORES CITY-ST-ZIP | | | | | |
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