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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

SIGNATURE

DIVISION OF CORPORATIONS

I. Corporation Name	F9300006/40/	(9)
EKO PROMOTIONS,	INC.	

Principal Place of Business Mailing Address 2301 COLLINS AVENUE #407-A 2301 COLLINS AVENUE #407-A MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 11/10/1995 3a. Date of Last Report FIRST REPOM 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-062234 Not Applicable Suite, Apt. #. etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Z_{iD} Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MORALES, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 82 2301 COLLINS AVENUE #407-A MIAMI BEACH FL 33139 8.3 City 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and tine if accidable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS CR2E034 (12/95) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PΩ THE DELETE 1. 1 TITLE ☐ Change ☐ Addition MORALES, WILLIAM NAME 1.2 NAME 2301 COLLINS AVENUE #407-A STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CHTY - \$1 - ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2 1 TITLE Change ☐ Addition ISALES, JACQUELINE NAM: 2.2 NAME 2301 COLLINS AVENUE #407-A STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 2.4 CITY-ST-ZIP THILE DELETE 3.1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-S1-2IP 3.4 CITY - ST - ZIP THE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS C+1Y+S1+ZIP 4.4 CITY - ST - ZIP TILLE DELETE 5 1 TITLE Change Addition | NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CI*Y - \$1 - 2IP 5.4 CITY-ST-ZIP TillE DELETE 6. 1 THILE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CiTY-ST-ZIP 64 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 119.07(3)(k), 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 inchanged, or own attachment with an address.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PresiDENT