

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

FILED

Feb 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000000628 (3)

1. Corporation Name  
C.K. IMPORT-EXPORT OF SW FLORIDA, INC.



Principal Place of Business  
18066 SAN CARLOS BLVD.  
BOARDWALK CAPER 422  
FT. MYERS BEACH FL 33931

Mailing Address  
18066 SAN CARLOS BLVD.  
BOARDWALK CAPER 422  
FT. MYERS BEACH FL 33931-2951

3. Date Incorporated or Qualified 01/03/1996	3a. Date of Last Report
4. FEI Number 65-0632190	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 18086 San Carlos Blvd Suite, Apt. #, etc. 22 Boardwalk Caper #816 City & State 23 Fort Myers Beach Zip 24 FL	2a. Mailing Address 26 18086 San Carlos Blvd Suite, Apt. #, etc. 27 Boardwalk Caper #816 City & State 28 Fort Myers Beach Zip 29 FL
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9. Name and Address of Current Registered Agent  
JESSEN, ANDREW G  
6371-4 PRESIDENTIAL CT.  
FT. MYERS FL 33919

10. Name and Address of New Registered Agent  
81 Name Lilliane Marcinkiewicz  
82 Street Address (P.O. Box Number is Not Acceptable)  
37 N.E. 9th Ave.  
83  
84 City Cape Coral FL 85 Zip Code 33909

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: *Lilliane Marcinkiewicz* DATE: 1/16/97  
Signature, typed or printed name of registered agent and local applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	KOCHEL, CHRISTINA	
STREET ADDRESS	18066 SAN CARLOS BLVD. BOARDWALK CAPER 422	
CITY-ST-ZIP	FT. MYERS BEACH FL 33931	
TITLE	PST	<input type="checkbox"/> DELETE
NAME	KOCHEL, CHRISTINA	
STREET ADDRESS	18066 SAN CARLOS BLVD. BOARDWALK CAPER 422	
CITY-ST-ZIP	FT. MYERS BEACH FL 33931	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Koechel, Christina	
1.3 STREET ADDRESS	18086 San Carlos Blvd. Boardwalk Caper	
1.4 CITY-ST-ZIP	Fort Myers Beach, FL 33931 #816	
2.1 TITLE	PST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Koechel, Christina	
2.3 STREET ADDRESS	18086 San Carlos Blvd. Boardwalk Caper	
2.4 CITY-ST-ZIP	Fort Myers Beach, FL 33931 #816	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: *Christina Koechel* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: Daytime Phone #