## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # P96000006098 Jan 19, 2000 8:00 am 1. Entity Name **Secretary of State** KOSKI KLOCK KOMPANY, INC. 01-19-2000 90207 001 \*\*\*150.00 Mailing Address Principal Place of Business 29703 67TH STREET NORTH 29703 67TH STREET NORTH **CLEARWATER FL 33761-1610** CLEARWATER FL 33761 3. Mailing Address 2. Principal Place of Business Florida Ave 114 Florida Ave DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number 59-3357001 Florida Harbor, Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Required <u>us A</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KOSKI, W. DENNIS Street Address (P.O. Box Number is Not Acceptable) 29703 67TH STREET NORTH CLEARWATER FL 33761 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change M Addition ☐ Defete Director TITLE NAME KOSKI, W. DENNIS STREET ADDRESS STREET ADDRESS 29703 67TH STREET NORTH CITY: ST-ZIP CITY-ST-ZIP. **CLEARWATER FL 33761** Change Addition ☐ Delete TITLE TITLE NAME KOSKI, PEGGY STREET ADDRESS STREET ADDRESS 29703 67TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33761 ☐ Change ☐ Addition Delete TITI F TITLE NAME NAME KOSKI, RYAN M. STREET ADDRESS STREET ADDRESS 29703 67TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33761** ☐ Change ■ Addition ☐ Delete TITLE TITLE KOSKI, JARRETT W. NAME NAME STREET ADDRESS STREET ADDRESS 29703 67TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33761** ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Koski