

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90337 014 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P96000024058

1. Entity Name
OR KOL, INC.



20048587

Principal Place of Business
7800 W OAKLAND PARK BLVD
STE G-121
SUNRISE, FL 33351 US

Mailing Address
% REJEAN LAPIERRE
7800 W OAKLAND PARK BLVD., BLDG G
SUNRISE, FL 33351



DO NOT WRITE IN THIS SPACE

D4103005 No Chg-P GR25034 (10/03)

4. Fil Number
63-0700514
Applied For
Not Applicable
A. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

5. Name and Address of Current Registered Agent

LAPIERRE, REJEAN
7800 W OAKLAND PARK BLVD
BLDG G
SUNRISE, FL 33351

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IN THIS SPACE

6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, name or printed name of registered agent or registered agent

NOTE: Signature Area subject to audit and verification

4/21

FILE INCREASED FEE IS \$150.00
After May 1, 2005 Fee will be \$250.00

8. Spouse Campaign Financing
Trust Fund Contribution ☐

\$3.00 Act 60
Added to Fee

OFFICERS AND DIRECTORS

TO	P
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LANDMANN, ZUIA 7800 W OAKLAND PARK BLVD STE G-121 SUNRISE, FL 33351
PRES NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
VICE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

16. I hereby certify that the information supplied with this filing does not violate the exemption stated in Section 119.07(3)(X), Florida Statutes. I further certify that the information indicated on this report or registration packet 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 individual or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 40 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

Zuia Landmann President ZUIA LANDMANN 4/22/05

Print

Signature Block 7

FROM: OR KOL INC

FAX NO.: 972 3 6041304

Apr. 22 2005 07:00PM P2