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FILED
Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # **P96000025887**

1. Corporation Name

SOINI INC.

Principal Place of Business

Main Address

**720 N. DIXIE HWY #406
LANTANA, FL 33462**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

-96

4. FET Number

Applied For
☒ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Main Address

21 **5066 OWLS COURT**

26 **5066 OWLS COURT**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **LAKE WORTH**

28 **LAKE WORTH**

24 Zip Country

29 Zip Country

33463

33463

9. Name and Address of Current Registered Agent

**TIMO SOINI
720 N. DIXIE HWY #406
LANTANA FL 33462**

10. Name and Address of Now Registered Agent

81 Name **PANU VIRTANEN**

82 Street Address (P.O. Box Number is Not Acceptable)
5066 OWLS COURT

83

84 City **LAKE WORTH**

FL

85 Zip Code
33463

11. Pursuant to the provisions of Sections 607.0532 and 607.1509, 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 agree to the provisions of Section 607.0535, Florida Statutes.

SIGNATURE

[Signature]

PANU VIRTANEN

04/20/1998

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY-ST-ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY-ST-ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY-ST-ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

35 TITLE

36 NAME

37 STREET ADDRESS

38 CITY-ST-ZIP

39 TITLE

40 NAME

41 STREET ADDRESS

42 CITY-ST-ZIP

43 TITLE

44 NAME

45 STREET ADDRESS

46 CITY-ST-ZIP

**300002547203
-06/04/98--01026--044
***158.75**

14. 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 annual report is true, correct, 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 business, and that I am empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, as applicable.

SIGNATURE:

[Signature]

HANNELE LOUKIA 05.18.1998 (56) 642-7304

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Digitized by

CR2E034 (10/97)