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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000032520 (4)**

KOCHULA'S IMPORT & EXPORT, CORP.

7703 CAMINO REAL #207 7703 CAMINO REAL #207 MIAMI FL 33143 MIAM! FL 33143-7124 3. Date Incorporated or Qualified 3a. Date of Last Report 04/15/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes 🔲 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 KOCHULINSKI, LUIZ C Name KOCHULINSKI Luis C. 7703 CAMINO REAL Street Address (P.O. Box Number is Not Acceptable) 82 207 #207 83 **MIAMI FL 33143** 84 City MAMI 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 Signature, typed or per test name of registered agent and tite if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 13. □ DELETE Change DILLE 1.1 TITLE KOCHULINSKI, LUIZ C NAME 1.2 NAME 7703 CAMINO REAL #207 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33143** City-St-7P 1.4 City-St-ZiP DELETE ☐ Change Addition TITLE 21 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY:SI:7P DELETE Change Addition HILI 31 TITLE NAME 32 NAME **3.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 3 4. CITY - ST - ZIP □ DELETE Change Addition TITLE 41 TITLE

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

4 2 NAME

51 TITLE

52 NAME

61 TITLE

62 NAME

4.3 STREET ADDRESS

53 STREET ADDRESS 54 CITY-ST-ZIP

6.3 STREET ADDRESS 64 CITY-ST-ZIP

4.4 City - St - ZiP

SIGNATURE:

NAME

TITE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - S1 - ZIP

CITY - ST - ZIP

CITY - ST - ZIP

DELETE

DELETE

Ulviza. Kachurlinski 2.5.97

FILED

Feb 11 1997 8:00am

Secretary of State

Davtime Phone #

Change

Addition

Addition