

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90075 005 ***150.00

0485119

DOCUMENT # P96000035739

1. Corporation Name

BDK INTERNATIONAL, INC.

Principal Place of Business

14000 S. TAMiami TRAIL
NORTHPORT FL 34287

Mailing Address

14000 S. TAMiami TRAIL
NORTHPORT FL 34287

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/24/1996

4. FEI Number

59-3376060

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KADIWAR, KAMLESH B
2843 HOPWOOD ROAD
NORTH PORT FL 34287

81 Name

KADIWAR, KAMLESH B

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

1041 HARBOUR GLEN PLACE

83

84 City

PUNTA GORDA

FL

85 Zip Code

33983

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

KADIWAR, KAMLESH B

PRESIDENT

KAMLESH B. KADIWAR

3/19/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME PT
STREET ADDRESS KADIWAR, KAMLESH B
CITY-ST-ZIP 2843 HOPWOOD ROAD
NORTHPORT FL 34287

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME PT
1.3 STREET ADDRESS KADIWAR, KAMLESH B
1.4 CITY-ST-ZIP 1041 HARBOUR GLEN PLACE
PUNTA GORDA FL 33983

TITLE ☐ DELETE
NAME T
STREET ADDRESS KADIWAR, KAVITA
CITY-ST-ZIP 2843 HOPWOOD ROAD
NORTHPORT FL 34287

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME KADIWAR, KAVITA
2.3 STREET ADDRESS 1041 HARBOUR GLEN PLACE
2.4 CITY-ST-ZIP PUNTA GORDA FL 33983

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

KADIWAR, KAMLESH B

3/19/99

941-426-4602

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR25024 (11/98)