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**

DOCUMENT # P96000102830 1, Corporation Name

UVK A TOUCH OF WOOD, INC.

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90122 035 ***150.00

|--|

Principal Place	e of Business	Mailing Address				
3400 PINEWALK	(DR N #323 ·	S480 PINEWALK OR N #323	· .	·		
MARGATE FL 3	13009·	MARGATE FL-99009-	<i>3</i> *	DO NOT WRITE IN THIS SP	ACE	
			_	3. Date Incorporated or Qualifed	102	
			_	12/23/1996		
2 Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 と 30		26 2307 NW	37TH A		Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		-	8.75 Additional	
22	,, 5.55	27		5. Certifcate of Status Desired	Fee Required	
City & State	e .	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 6060	NUT CREEK FL	28 COCONUT CR	LEEK F	Trust Fund Contribution	Added to Fees	
Zip	Country		Country	8. This corporation owes the current year Intang	ible	
24 330	66 25	29 33066 30		Personal Property Tax.	Yes VNo	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Age	nt	
1/40						
KASHUV, UZI				Address (P.O. Box Number is Not Acceptable)	k.	
3400 PINEWALK UH N \$325				SOT NW 37 TH AVE		
MAH	GATE FL 33063	· t		· .	***,	
			84 City		5 Zip Code	
				COCONUL CREEK FL	33066	
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, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in familiar with, and accept the obligations of Section 607.0505; Florida Statutes.						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required who						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND I	Change Addition	
TITLE	D	<u> </u>	1.1 TITLE	_	Change C Addition	
NAME	KASHUV, UZI		1.2 NAME	AND WAR AVE		
STREET ADDRESS	3480 PINEWALK DR N #323		1.3 STREET ADDRESS	2307 70 37	33066	
C/TY-ST-ZiP	MA RGATE FL 33063		1.4 CITY-ST-ZIP	2307 NU 37 TH AVE COCONUT CREEK, FL	Change Addition	
TITLE			2.1 ΠTLE	_	CharigeAddition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		1 Change	
TITLE			3.1 TITLE		Change	
NAME		L.	3.2 NAME		1	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP		1.Change Addition	
TITLE			4.1 TITLE	<u> </u>	Change Addition	
NAME			4. 2 NAME			
STREET ADORESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		101 T3 4 4 4 14 1	
TITLE			5.1 TITLE	<u> </u>	Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY-ST-ZIP	A STATE OF THE STA		5 4 CITY-ST-ZIP			
TITLE .			6.1 TITLE		Change	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		,	
	i		0 4 00D/ AT TID	1		

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: