

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

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000015640 (0)

1. Corporation Name

NIKINI NOSCHKA, INC.



Principal Place of Business

23200 CAMINO DEL MAR #305
BOCA RATON FL 33433

Mailing Address

23200 CAMINO DEL MAR #305
BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1997

4. FEI Number

65-0740334

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

21 1121 HOLLAND DRIVE

Suite, Apt. #, etc.

22 Bay # 12

City & State

23 BOCA RATON, Florida

Zip

24 33433

Country

25 USA

2a. Mailing Address

26 1121 HOLLAND DRIVE

Suite, Apt. #, etc.

27 Bay # 12

City & State

28 BOCA RATON FLORIDA

Zip

29 33487

Country

30 USA

9. Name and Address of Current Registered Agent

BERGMANN, NINA
23200 CAMINO DEL MAR #305
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

81 Name

82 NIKINI NOSCHKA

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

84 1121 HOLLAND DRIVE

85 BAY # 12

City

BOCA RATON, FL FL

86 Zip Code

33487

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

0
NAME BERGMANN, NINA
STREET ADDRESS 23200 CAMINO DEL MAR #305
CITY-ST-ZIP BOCA RATON FL 33433

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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.

SIGNATURE: Nikini Noschka

2/18/98 5:19:12 PM

CR2E034 (10/97)