

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  
Jun 01, 1999 8:00 am  
Secretary of State

06-01-1999 90025 039 \*\*\*158.75

DOCUMENT # P97000040112

1. Corporation Name  
DOKU ENTERPRISES, INC.

Principal Place of Business

305 LOCK RD #10  
DEERFIELD BEACH FL 33442  
US

Mailing Address

305 LOCK RD #10  
DEERFIELD BEACH FL 33442  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/02/1997

4. FEI Number

65-0765841

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 the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 424 LOCK ROAD

Suite, Apt. #, etc.

22 62

City & State

23 DEERFIELD BCH, FL

Zip

24 33442

Country

25 US

2a. Mailing Address

26 424 LOCK ROAD

Suite, Apt. #, etc.

27 62

City & State

28 DEERFIELD BCH, FL

Zip

29 33442

Country

30 US

9. Name and Address of Current Registered Agent

DOKU, JOHN A  
305 LOCK RD #10  
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent

81 Name

JOHN K DOKU

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

424 LOCK ROAD

83 Suite, Apt. #, etc.

62

84 City

DEERFIELD BEACH, FL

85 Zip Code

33442

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 PTSD ☐ DELETE

NAME DOKU, JOHN A  
STREET ADDRESS 305 LOCK RD #10  
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE VD ☐ DELETE

NAME DOKU, TONISHA S  
STREET ADDRESS 305 LOCK RD #10  
CITY-ST-ZIP DEERFIELD BCH FL 33442

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T/S/D ☒ Change ☐ Addition

1.2 NAME JOHN DOKU

1.3 STREET ADDRESS 424 LOCK ROAD #62

1.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

2.1 TITLE VID ☒ Change ☐ Addition

2.2 NAME TONISHA DOKU

2.3 STREET ADDRESS 424 LOCK ROAD #62

2.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME CLEMENCE DOKU

3.3 STREET ADDRESS 530 SW 11 DRIVE

3.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 or empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/13/99

Daytime Phone #

(954) 248-7414

CR2E034 (11/98)