

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P997000068175

1. Entity Name

Nok Nok of Orlando ---

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 DEC 22 PM 3:31

Principal Place of Business

50 East Central Suite B
Orlando, FL 32801

Mailing Address

1417 Philadelphia Ave
Orlando, FL 32803

2. Principal Place of Business

50 East Central Blvd.

Suite, Apt. #, etc.

Suite B

City & State

Orlando, FL

Zip

32801

Country

USA

3. Mailing Address

1417 Philadelphia Ave

Suite, Apt. #, etc.

City & State

Orlando, FL 32803

Zip

32803

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

593463868

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DKL, WILLIAM
873 Nottingham Street
Orlando, FL 32803

7. Name and Address of New Registered Agent

Name

Christopher James Cina

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

1480 Brooks Lane

City

Oviedo

FL

Zip Code

32765

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Christopher James Cina (VP) Chris Cina

12-18-2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
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CITY-ST-ZIP

☐ Change

☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Christopher James Cina

Chris Cina

12-18-2000

407 310-8013

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

2

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I am enclosing the Uniform Business Report for Nok Nok of Orlando. I am also enclosing a check for \$150.00 for our filing fee. I apologize for the check coming late but we have had a change of management in the corporation. I have noted the new shareholders as well as our new mailing address. Thank you for attention to this matter. Please send any future correspondence to our new mailing address and send a copy to the address of our registered agent if possible.

Sincerely,



Christopher Cina
Vice President Nok Nok of Orlando