

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000068614

1. Entity Name

KIKO INTERNATIONAL ENTERPRISES CORP.

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90009 048 ***558.75

Principal Place of Business

Mailing Address

7597 NW 7 ST
MIAMI FL 33126
US

7597 NW 7 ST
MIAMI FL 33126-2906
US

2. Principal Place of Business

7587 NW 7 ST.

Suite, Apt. #, etc.

3. Mailing Address

7587 N.W. 7TH ST.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0782083

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MAZZA, FRANCISCO N
7597 NW 7 ST
MIAMI FL 33126

Name

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

7587 N.W. 7TH ST.

City

MIAMI

FL

Zip Code

33126

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MAZZA, FRANCISCO S NETO
STREET ADDRESS 7597 NW 7 ST
CITY-ST-ZIP MIAMI FL 33126

☐ Delete

TITLE
NAME
STREET ADDRESS 7587 NW 7 ST
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VD
NAME MAZZA, YARA P
STREET ADDRESS 7587 NORTH WEST 7TH STREET
CITY-ST-ZIP MIAMI FL 33126

☐ Delete

TITLE
NAME
STREET ADDRESS 7587 NW 7TH STREET
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

07/31/00

Date

(305)269-0133

Daytime Phone #

CR2E034 (9/99)