

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90181 048 ***150.00

DOCUMENT # P97000069176

1. Entity Name
KAMICO COMPANY, INC.

Principal Place of Business
 7281 N.E. 8 DRIVE
 BOCA RATON, FL
 33487-2420

Mailing Address
 7281 N.E. 8 DRIVE
 BOCA RATON, FL. 33487-2420

2. Principal Place of Business
 7281 N.E. 8 DRIVE
 Suite, Apt. #, etc.

3. Mailing Address
 7281 N.E. 8 DRIVE
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 BOCA RATON, FL.

City & State
 BOCA RATON, FL.

4. FEI Number
 65-0779781

Applied For
 Not Applicable

Zip
 33487-2420

Country
 USA

Zip
 33487-2420

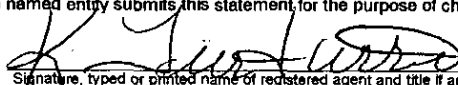
Country
 USA

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
TURTURRO, KAMI
 107 HALF MOON CIRCLE
 APT C-3
 HYPOLUXO FL. 33462

7. Name and Address of New Registered Agent
 Name
TURTURRO, KAMI
 Street Address (P.O. Box Number is Not Acceptable)
7281 N.E. 8 DRIVE
 City
BOCA RATON **FL** Zip Code
33487-2420

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  **KAMI TURTURRO** **4/25/2000**
 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.

FILE NOW!!! FEE IS \$160.00
After MAY 1, 2000 Fee will be \$660.00
Make Check Payable to Department of State

10. Election Campaign Financing **\$5.00**
 Trust Fund Contribution. May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS TUTURRO, KAMI 7281 N.E. 8 DRIVE BOCA RATON, FL. 33487-2420 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT BOZZI, ANTHONY 7281 N.E. 8 DRIVE BOCA RATON, FL. 33487-2420 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **KAMI TURTURRO** **4/25/2000** **954-781-0077**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #