

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2002 8:00 am
Secretary of State

08-13-2002 90224 006 ***150.00

DOCUMENT # P98000000125

1. Entity Name
OKONSKI INC.

Principal Place of Business

3975 JOG RD
 GREENACRES CITY FL 33467

Mailing Address

3975 JOG RD
 GREENACRES CITY FL 33467

2. Principal Place of Business

3. Mailing Address

*Suite, Apt. #, etc.

Suite, Apt. #, etc.

*City & State

City & State

Daytona Beach, FL

Zip

Country

Zip

Country

32114

4. FEI Number

65-0802850

Applied For

Not Applicable

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

OKONSKI, MIRTA I
611 WOOLBRIGHT RD, APT 408A
BOYNTON BEACH FL 33435

Name *Susan Kidd*

Str *441 S. Ridgewood Ave.*

City *Daytona Beach*

FL

Zip Code

32114

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Susan L. Kidd

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

(NOTE: Registered Agent signature required when reinstating)

8/2/02

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 ☐ Delete
 NAME **D OKONSKI, MIRTA I**
 STREET ADDRESS **611 WOOLBRIGHT RD, APT 408A**
 CITY-ST-ZIP **BOYNTON BEACH FL 33435**

TITLE ☒ Change ☐ Addition
 NAME *2016 S. Federal Hwy # 407E*
 STREET ADDRESS *Boynton Beach, FL 33435*
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

William B. [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment
074036
09800000125

August 6, 2002

Okonski, Inc.
3975 Jog Road
Greenacres City, FL 33467

Florida Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

We did not receive our original Annual Report and missed the filing date. Please accept our check for \$150 and remove the penalty. We will file in a timely manner in the future.

Sincerely,



Mirta Okonski
President