

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000104533

1. Entity Name
NIKO, INC.

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90107 048 ***150.00

Principal Place of Business

6671 RACQUET CLUB DR.
LAUDERHILL FL 33319

Mailing Address

6671 RACQUET CLUB DR.
LAUDERHILL FL 33319-1801

2. Principal Place of Business

961 S. OCEAN BLVD

Suite, Apt. #, etc.

#206

City & State

DEERFIELD BEACH, FL

Zip

33441

Country

BROWARD

3. Mailing Address

961 S. OCEAN BLVD

Suite, Apt. #, etc.

#206

City & State

DEERFIELD BEACH, FL

Zip

33441

Country

BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0880165**

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

CLIFFORD, JAMIE
6671 RACQUET CLUB DR.
LAUDERHILL FL 33319

Name

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

City

FL

Zip Code

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

FRED HOWARD V.P.

4/28/00

(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** ☐ Delete
NAME **CLIFFORD, JAMIE**
STREET ADDRESS **6671 RACQUET CLUB DR.**
CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE **PD** ☒ Change ☐ Addition
NAME **JAMIE, CLIFFORD**
STREET ADDRESS **961 S. OCEAN BLVD #206**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33441**

TITLE **V** ☐ Delete
NAME **HOWARD, FRED**
STREET ADDRESS **6671 RACQUET CLUB DR.**
CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE **V** ☒ Change ☐ Addition
NAME **FRED HOWARD**
STREET ADDRESS **961 S. OCEAN BLVD #206**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33441**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRED HOWARD V.P.

Date

Daytime Phone #

CR2E034 (9/99)