

2001 UNIFORM BUSINESS REPORT (UBR)

Amended

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 DEC 20 AM 10: 21

DOCUMENT # P99000024203
1. Entity Name
KANNIKA INC.

Principal Place of Business Mailing Address
5458 W. SAMPLE ROAD MARGATE FL 33073 **4216 TRANQUILITY DRIVE FL 33487**
HIGHLAND BEACH FL 33487

2. Principal Place of Business 3. Mailing Address
5458 W. SAMPLE ROAD **4216 TRANQUILITY DR**
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
MARGATE FL. **HIGHLAND BEACH**
Zip Country Zip Country
33073 USA **33487 USA**

4. FEI Number **650910348** Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
SUSSKIND HORST
4216 TRANQUILITY DRIVE
HIGHLAND BEACH FL. 33487

7. Name and Address of New Registered Agent
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]* DATE **12/17/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SUSSKIND, DUENPEN	
STREET ADDRESS	4216 TRANQUILITY DRIVE	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SUDNAEN, KANNIKA	
STREET ADDRESS	4921 EGRET PL.	
CITY-ST-ZIP	COCONUT CREEK FL. 33073	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SUDNAEN, CHEEP	
STREET ADDRESS	4921 EGRET PL.	
CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUDNAEN, ARTITH	
STREET ADDRESS	4921 EGRET PLACE	
CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUDNAEN, SIREE	
STREET ADDRESS	4921 EGRET PLACE	
CITY-ST-ZIP	COCONUT CREEK FL 33073	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: *[Signature]* DATE **10/17/01** **5612768289**
Signature and printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Daytime Phone #

CR2E037 (11/00)

83