2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P99000033581** 

NIKKI DEVELOPMENT CORPORATION

Entity Name



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business

3637 NE 2ND ST GAINESVILLE, FL 32609 Mailing Address

NIKKI DEVELOPMENT CORP. PO BOX 1008 MELROSE, FL 32666



## DO NOT WRITE IN THIS SPACE

04272007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0911334 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and Address of	Current	Registered	Agent

CABASSA, PAUL L 3637-A N.E. 2ND ST GAINESVILLE, FL 32609

## DO NOT WRITE IN THIS SPACE

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	e named entity submits this statement for the p tions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	·	d apolicable (NOTE Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  Prust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		· · · · · · · · · · · · · · · · · · ·	
TITLE	PVST				
NAME	CABASSA, PAUL L				
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	GAINESVILLE, FL 32609			•	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR CIDES

PAUL CASASIA

4 27/00

Daytime Phone #