## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #	P9900007333
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1. Entity Name

SIGNATURE:

NK MANAGEMENT CORP.



FILED
Feb 20, 2003 8:00 am
Secretary of State
02-20-2003 90110 019 \*\*\*158.75

-	TO WE THE

					l Control	_						
	ice of Business VERSITY DRIVE FL 33324	1133 S. SUITE 2	Mailing Address 1133 S. UNIVERSITY DRIVE SUITE 202 PLANTATION FL 33324									
Principal Place of Business     Address     Address												
Suite, Apt. #, etc. Suite, Apt. #, etc							☐ CHECK HERE IF MAKING CHANGES					
City & Sta	ite	City &	City & State			4.	4. FEI Number 65-0971331 Applied For					
Zip	Country	Zip	Zip Country			5.	5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name and Address of Curre	nt Registered /	Agent	<u> </u>		7.	Name and	Address of Ne				
					. Name							
KAHOOK 1133 S. U	, nofal Jniversity Drive				Street Add	ress (P.O.	Box Numbe	r is Not Accepta	able)	***		
SUITE 20	2						***		***			
PLANTAT	10N FL 33324				City	<del></del>			FL	Zip Coc	le	
the obligation	e named entity submits this statemen tions of registered agent.  Signature, typed or printed name of registered ag		·		Agent signature n				DATE			
Afte Make Checi	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.0 k Payable to Florida Department	of State				W.,	1	ction Campaign st Fund Contribu			May Be to Fees	
10.	T	ID DIRECTORS		11.		Α	DDITIONS/	CHANGES TO C	FFICERS AND	DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPS KAHOOK, NOFAL 1133 S. UNIVERSITY DRIVE, # PLANTATION FL 33324	202	☐ Delete	TITLE NAME STREE CITY-	T ADDRESS					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	NAME STREE CITY-	T ADDRESS					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	; + - <del></del>		□ Delete	TITLE NAME STREE CITY-S	T ADDRESS ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	TADDRESS ST-ZIP					Change	Addition	
ITLE NAME Street adoress City-St-Zip			☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP		5	-		Change	Addition	
ITLE IAME STREET ADDRESS SITY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP	-v		P.		Change	Addition	
of the corr	ertify that the information supplied wi on this report or supplemental report coration or the receiver or trustee em or on an attachment with an address	nowered to eye	rute this report a									