

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091255

1. Entity Name

~~INTER-KONT (USA), INC.~~
FILCON (USA), Inc.

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90045 024 ***150.00

Principal Place of Business

~~17 SOUTHEAST 24TH AVENUE~~
~~POMPANO BEACH FL 33062~~

Mailing Address

~~17 SOUTHEAST 24TH AVENUE~~
~~POMPANO BEACH FL 33062-5316~~

A0030977



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

37639 Howard Avenue

3. Mailing Address

37639 Howard Avenue

Suite, Apt. #, etc.

Unit 5

Suite, Apt. #, etc.

Unit 5

City & State

Dade City, Florida

City & State

Dade City, Florida

Zip

Country

33525

Pasco

Zip

Country

33525

Pasco

4. FEI Number

65-0984489

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOVANOVIC, DOUGLAS ESQ.
17 SOUTHEAST 24TH AVENUE
POMPANO BEACH FL 33062

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

(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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KONTEVSKA, TANJA 17 SOUTHEAST 24TH AVENUE POMPANO BEACH FL 33062	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD KONTEVSKI, FILIP 17 SOUTHEAST 24TH AVENUE POMPANO BEACH FL 33062	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KONTEVSKI, GOCE 17 SOUTHEAST 24TH AVENUE POMPANO BEACH FL 33062	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 37639 Howard Ave, Unit 5 Dade City, Florida 33525
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 37639 Howard Ave, Unit 5 Dade City, Florida 33525
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Tanja Kontevska Pres. 2/29/00 352 518-0749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #