2002 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 04, 2002 8:00 am

DOCU 1. Entity Nan I.N.K.E.E.		# S07983	3				,	ecreta 8-04-2002 90	•			
3518 S. DIXIE	ce of Business HWY. BEACH FL 334		Mailing Address 861-C N. MILITARY TRAIL W. PALM BEACH FL 33415				1 (23 ((2) 2 (1) 23 (()	INDIO IGIDI IDIDO SIII	#1 # 11 #1#11 #1# 11 #	1611 6 181	II Bib ij (Bb i	
Principal Place of Business 3. Mailing Add			3. Mailing Address	Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State				4. FEI Number 65-	0228523		4	lied For Applicable	
Zip Country			Zip			L	5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Current R	egistered Agent		Name		7. Name and Addres	s of New Regist	ered Agent			
KARACHALIAS, IOANNIS 861-C N. MILITARY TRAIL						dress (P.	ss (P.O. Box Number is Not Acceptable)					
	LM BEACH											
4	,				City			· · · · · · · · · · · · · · · · · · ·	FL Zip	Code		
	named entity	submits this statement for tered agent.	he purpose of changing its	register	ed office or i	registered	d agent, or both, in the	State of Florida.	I am familiar v	vith, ar	nd accept	
SIGNATURE.		•						,				
		or printed name of registered agent and	d title if applicable. (NOTI	E: Registere	d Agent signatur	e required wi	nen reinstating)		DATE			
Tax filing r		ble to satisfy its Intangible nd elects to do so.	FILE NOW! After September 13 Make Check Payab	, 2002	Fee will be	\$750.00	Trust Fund	ampaign Financin Contribution.			May Be o Fees	
11.		OFFICERS AND D		12.		- Cuito	ADDITIONS/CHANG	ES TO OFFICER	S AND DIREC	ORS	N 11	
TITLE NAME STREET ADDRESS		LIAS, IOANNIS MILITARY TRAIL	☐ Delete	TITLE					☐ Cha		Addition	
CITY-ST-ZIP		M BEACH FL 33415			-ST-ZIP							
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEN OF DIRECTOR

Date

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Attachment 0# 501983 972052

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Ü	I. N. K. E. E. INC. 01-91	
	PH. 561-687-4897 3518 SOUTH DIXIE HIGHWAY WEST PAI M BEACH, FL 33405 Date Marel 28	63-4/630 FL 1
	WEST PALM BEACH, FL 33405 Date	
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I.N.K.E.E., Inc.

861 - C Military Trail W. Palm Beh, FL 33415

Phone 561-687-4897 TFax 561-744-8902 (1995) (1995) (1995) (1995) (1995)

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Division of Corporations PO Box 6327~ Tallahassee, FL 32314

To: Whom It May Concern:

Re: Corporate Renewal.

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 This letter is in reference to your letter I received regarding my Corporate Renewal. I mailed in my corporate renewal on time with a check for \$ 150.00. Enclosed is a copy of the check. The check has still not cleared. I thought maybe it could take a while. I have not received the envelope back for any reason so I assumed that you received it. Please find enclosed a copy of my check. Please research your records and if you need a new check I will be happy to write one. I have not canceled this existing check due to the fact it cost \$25.00. If I have to I will and issue you a new one. Because I was on time as you can see I would really appreciate it if you could wave this penalty fee of \$ 400 00. Thank you so much for your cooperation with this matter.

If you have any questions please contact me. Thank you.

Sincerely,

Ioannis Karachalias