

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Bureau of Corporations
DIVISION OF CORPORATIONS

1995-195

DOCUMENT # **S67103**

(9)

1. Corporation Name

NAKO HOLDINGS, INC.

Principal Place of Business

**% BROAD & CASSEL
175 N.W. FIRST AVE., SUITE 2000
MIAMI FL 33128**

Mainly Address

**% BROAD & CASSEL
175 N.W. FIRST AVE., SUITE 2000
MIAMI FL 33128**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1991

3b. Date of Last Report

02/22/1994

4. FEI Number

65-0272852

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has failed, for at least one year, to file its annual report as required by Chapter 607, Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21

2a. Mainly Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

City, State, County

24

25

City, State, County

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**B & C CORPORATE SERVICES INC.
175 N.W. FIRST AVE.
SUITE 200, COURT HOUSE CENTER
MIAMI FL 33128-9965**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607 (500) and 607 150B, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607 (500), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Officer of Corporation

Signature of Registered Agent or Officer of Corporation

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PT
NAME	KUYUMCIYAN, LEVON
STREET ADDRESS	34 PRINCE PHILIP
CITY, ST, ZIP	OUTREMONT, CANADA
TITLE	VPS
NAME	KUYUMCIYAN, LINDA
STREET ADDRESS	34 PRINCE PHILIP
CITY, ST, ZIP	OUTREMONT, CANADA
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
1. NAME	
1.1 STREET ADDRESS	
1.1 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.2 STREET ADDRESS	
2.2 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.2 STREET ADDRESS	
3.2 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.2 STREET ADDRESS	
4.2 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.2 STREET ADDRESS	
5.2 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.2 STREET ADDRESS	
6.2 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (07) (b)(i), Florida Statutes. I further certify that this information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made prior to the filing of this report. 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 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Levon Kuyumciyan

LEVON KUYUMCIYAN

04/22/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Register 17-000-0