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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

KASKA KORP, INC.

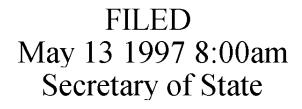
(2)

Principal Place of Business

4077 NE 5 TERR

Mailing Address

4077 NE 5 TERR





FT LAUDERDALE FL 33334		FT LAUDERDALE FL 33	FT LAUDERDALE FL 33334-2228					
							of Last Report 1/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ar	oplied For
21		26			65-0280814			ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	├ ¬ ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	30 Cou	ntry	8. This corporation has liability for i	ntangible ta		. 199.032,
	9. Name and Address of (Current Registered Agent		TOTAL TOTAL CONTRACT OF THE STATE OF	10. Name and Address of New Re	gistered A	gent	
LESKU, SHYRET 4077 NE 5TH TEMOC E TERRACE FT LAUDERDALE FL 33334				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83				
				84 City		FL	85 Zip (Code
Ottice of r	egistered agent, or both, in the	07.0502 and 607.1508, Florida State o State of Florida Such change was o obligations of, Section 607.0505,	s authorizei	d by the corp	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of c	hanging it ntment as	ls registered registered
SIGNATURE	Signature, typed of printed name of regist		saina teire					
12.		RS AND DIRECTORS	13.	Agent Bigitature r	equired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND I	NECTOR	90 IN 12
TITLE	P	DELETE	1,1 1	ıf	13511010,0171102010 10 01110		Change	Addition
NAME	Lesku, nasi	-	1.2 N			-		
STREET ADDRESS	11780 NW 14 ST			REET ADDRESS				
CITY-ST-ZIP	PLANTATION FL		1.4 CI	TY - ST - ZIP				
TITLE		DELETE	2.1 7/	TĘ.			Change	Addition
NAME			2.2 NA	ME				
STREET ADDRESS			2.3 ST	REE1 ADDRESS				
CITY-ST-ZIP				TY - ST - ZIP				
TITLE		DELETE	3.1 10			Ĺ	Change	☐ Addition
NAME			3.2 NA					
STREET ADDRESS				REE1 ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. C 4.1 Ti	TY-S1-ZIP			Change	Addition
NAME			4.1 ti			ι	"I chaule	L Addition
STREET ADDRESS				REET ADDRESS	•			
CITY-ST-ZIP				IY-\$1-ZIP				
TITLE	· • ·	DELETE	5.1 Ti				Change	Addition
NAME			5.2 N/			_		
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				IY-S1-ZIP				
TITLE		DELETE	6.1 TI				Change	Addition
NAME			6.2 NA			_	•	_
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				IY - S1 - ZIP				
								

I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.