

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024039

Entity Name: I & N INVESTMENTS OF GULFPORT, INC.**Current Principal Place of Business:**2502 53RD STREET SOUTH
ST. PETERSBURG, FL 33707**Current Mailing Address:**2502 53RD STREET SOUTH
ST. PETERSBURG, FL 33707 US**FEI Number:** 59-2999467**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARTHOLMEY, SCOTT
8200-113TH STREET
STE. 103
SEMINOLE, FL 33772 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	JACIW, NATALIA N
Address	1300 ISLINGTON AVENUE #1801
City-State-Zip:	TORONTO ON M9A 5-C4

Title	VP
Name	JACIW, IHOR
Address	1300 ISLINGTON AVENUE #1801
City-State-Zip:	TORONTO ON M9A 5-C4

Title	T
Name	KOWRYGA, TATIANA S
Address	598 BROWN'S LINE
City-State-Zip:	TORONTO ON M8W 3-V3

Title	S
Name	JACIW, PETER
Address	2502 53RD STREET SOUTH
City-State-Zip:	GULFPORT FL 33707

Title	VP
Name	D'ORAZIO, RIMMA S
Address	8495 ISLINGTON AVENUE
City-State-Zip:	WOODBIDGE ON L4L 1-A5

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NATALIA JACIW**OFFICER****02/13/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date