

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004891

Entity Name: SANOMAT INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

4940 WESTCHESTER CT., #3704  
NAPLES, FL

## Current Mailing Address:

4940 WESTCHESTER CT., #3704  
NAPLES, FL

## New Principal Place of Business:

4940 WESTCHESTER CT.  
# 3704  
NAPLES, FL 34105

## New Mailing Address:

4940 WESTCHESTER CT.  
# 3704  
NAPLES, FL 34105

FEI Number: 80-0307038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SARINA, ELEONORA  
4940 WESTCHESTER CT., #3704  
NAPLES, FL US

## Name and Address of New Registered Agent:

SARINA, ELEONORA AGENT  
4940 WESTCHESTER CT.  
#3704  
NAPLES, FL 34105 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: ELEONORA SARINA

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HOPNER, HANS  
Address: 4940 WESTCHESTER CT., #3704  
City-St-Zip: NAPLES, FL

Title: VCV ( ) Delete  
Name: ANISIMOW, DIMITRI  
Address: 930 5TH ST.  
City-St-Zip: SANTA MONICA, CA

Title: S ( ) Delete  
Name: SARINA, ELEONORA  
Address: 4940 WESTCHESTER CT., #3704  
City-St-Zip: NAPLES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HOPNER, HANS J  
Address: 4940 WESTCHESTER CT., #3704  
City-St-Zip: NAPLES, FL 34105

Title: VCV (X) Change ( ) Addition  
Name: ANISIMOW, DIMITRI V  
Address: 930 5TH ST.  
City-St-Zip: SANTA MONICA, CA

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELEONORA SARINA

S

04/27/2009

Electronic Signature of Signing Officer or Director

Date