

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071901

Entity Name: CARAVAN PRODUCT, INC.

FILED
Jan 23, 2008
Secretary of State

Current Principal Place of Business:

16850-112 COLLINS AVE., #196
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

231 174TH STREET, #808
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 65-1027415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPOVOK, ROMAN
16850-112 COLLINS AVENUE, 196
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAPOVOK, ROMAN
Address: 2851 LEONARD DRIVE, #J406
City-St-Zip: AVENTURA, FL 33160

Title: VP () Delete
Name: LAPOVOK, YEFIM
Address: 231-174TH STREET, 808
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAPOVOK, ROMAN
Address: 9165 CARLYLE AVENUE
City-St-Zip: SURFSIDE, FL 33154

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: ROMAN LAPOVOK

PRES

01/23/2008

Electronic Signature of Signing Officer or Director

Date