

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000021032

FILED
Apr 30, 2007
Secretary of State

Entity Name: NAVARRE SLEEP DISORDER GROUP INC.

Current Principal Place of Business:

21205 YACHT CLUB DRIVE
406
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

1200 GRAVESEND NECK RD
3L
BROOKLYN, NY 11229

New Mailing Address:

FEI Number: 20-0676080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OPPENHEIM, KIRA
21205 YACHT CLUB DRIVE
406
AVENTURA, FL 33180 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: OPPENHEIM, KIRA
Address: 1200 GRAVESEND NECK RD., APT 3L
City-St-Zip: BROOKLYN, NY 11229

Title: CD () Delete
Name: KOSOVSKIY, GENNADIY
Address: 10 CHASE DRIVE
City-St-Zip: SHARON, MA 02067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KIRA OPPENHEIM

P

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date