

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125776

Entity Name: LIMARA, CORP.

FILED  
Mar 31, 2006  
Secretary of State

**Current Principal Place of Business:**

412 73RD AVENUE  
UNIT 2  
ST. PETERSBURG BEACH, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

412 73RD AVENUE  
UNIT 2  
ST. PETERSBURG BEACH, FL 33706

**New Mailing Address:**

FEI Number: 20-1565396      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOCHOW, ALEX  
6263 N. CEDARBROOK DR.  
PINELLAS PARK, FL 33782      US

**Name and Address of New Registered Agent:**

CITAVICIENE, LINA  
412 73RD AVE  
UNIT 2  
ST PETERSBURG BEACH, FL 33706 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: LINA CITAVICIENE      03/31/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: CITAVICIENE, LINA  
Address: 412 73RD AVENUE, UNIT 2  
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: VP ( ) Delete  
Name: CITAVICITUS, EIMANTAS  
Address: 412 73RD AVENUE UNIT 2  
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CITAVICIENE, LINA  
Address: 412 73RD AVENUE, UNIT 2  
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LINA CITAVICIENE      P      03/31/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date