

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140850

FILED
Aug 16, 2006
Secretary of State

Entity Name: LOKH CORP.

Current Principal Place of Business:

1508 S.W. 57 TERRACE
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

C/O ARTVIK INC.
4738 BROADWAY
NEW YORK, NY 10040

New Mailing Address:

FEI Number: 20-5351542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANIKEYEV, ANDREY
1508 S.W. 57 TERRACE
CAPE CORAL, FL 33914 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANIKEYEV, ANDREY
Address: 1508 S.W. 57 TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP () Delete
Name: PEVZNER, SEMYON
Address: 33-47 91 STREET, APT. 4H
City-St-Zip: JACKSON HEIGHTS, NY 11372 US

Title: DIR () Delete
Name: SORKIN, STANISLAV
Address: 30 HENMAR DRIVE
City-St-Zip: CLOSTER, NJ 07624 US

Title: TR () Delete
Name: RUBIN, OLEG
Address: 781 ONEIDA TRAIL
City-St-Zip: FRANKLIN LAKES, NJ 07417 US

Title: SEC () Delete
Name: GLEZER, ALEX
Address: 66-36 YELLOWSTONE BLVD., APT. 22H
City-St-Zip: FOREST HILLS, NY 11375 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: SEMYON PEVZNER

VP

08/16/2006

Electronic Signature of Signing Officer or Director

_____ Date