

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000159289

1. Entity Name
THE NATALIA COMPANY, INC.



Principal Place of Business
3314 NORTHSIDE DRIVE #96
KEYWEST, FL 33040

Mailing Address
3314 NORTHSIDE DRIVE #96
KEYWEST, FL 33040

FILED

07 JUN -6 PM 3:19



2. Principal Place of Business - No P.O. Box #
14 CORAL WAY
Suite, Apt. #, etc.

3. Mailing Address
14 CORAL WAY
Suite, Apt. #, etc.

06042007 Chg-P CR2E034 (12/06)

City & State
KEY WEST FL
Zip
33040
Country
MONROE

City & State
KEY WEST FL
Zip
33040
Country
MONROE

4. FEI Number
20-2255443
☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VLADISLAVAS BORISEVIC
453 11 STREET OCEAN
MARATHON, FL 33050

7. Name and Address of New Registered Agent

Name
NATALIA MOROZOVA
Street Address (P.O. Box Number is Not Acceptable)
14 CORAL WAY
City
KEY WEST FL Zip Code
33040

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE NATALIA MOROZOVA - Presidente

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature Required when reinstating)

DATE

06/04/07

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
MOROZOVA, NATALIA
3314 NORTHSIDE DRIVE #96
KEYWEST, FL 33040 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
VLADISLAVAS, BORISEVIC
3314 NORTHSIDE DRIVE #96
KEY WEST, FL 33040 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition
000104256680
06/12/07--01014--018 **70.00

TITLE
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☐ Change ☐ Addition

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CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATALIA MOROZOVA - Presidente

06/04/07 (305) 923-6802

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #