

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000072749

**FILED  
Apr 13, 2017  
Secretary of State  
CC3649016067**

**Entity Name:** MOTYKA CORPORATION

**Current Principal Place of Business:**

4919 SABLE PINE CIRCLE  
APT F  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

4919 SABLE PINE CIRCLE  
APT F  
WEST PALM BEACH, FL 33417 US

**FEI Number:** 45-3160885

**Certificate of Status Desired:** No

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

MOTYKA, DARYA  
4919 SABLE PINE CIRCLE  
APT F  
WEST PALM BEACH, FL 33417 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            MOTYKA, MICHAL  
Address        4919 SABLE PINE CIRCLE  
                  APT F  
City-State-Zip: WEST PALM BEACH FL 33417

Title            DIRECTOR, TREASURER,  
                  SECRETARY  
Name            MOTYKA, DARYA  
Address        4919 SABLE PINE CIRCLE  
                  APT F  
City-State-Zip: WEST PALM BEACH FL 33417

*I hereby 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 all other like empowered.*

**SIGNATURE:** DARYA MOTYKA

**DIRECTOR**

**04/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail Date