

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000000358

**Entity Name:** LUCKY LARIK GROUP, INC.

**Current Principal Place of Business:**

300 THREE ISLANDS BLVD  
STE 510  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

300 THREE ISLANDS BLVD  
STE 510  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 81-4905220

**Certificate of Status Desired:** No

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

LARINA, MARINA  
300 THREE ISLANDS BLVD  
STE 510  
HALLANDALE BEACH, FL 33009 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 D  
Name LARIN, KIRILL  
Address 300 THREE ISLANDS BLVD  
STE 510  
City-State-Zip: HALLANDALE BEACH FL 33009

Title P/T  
Name LARIN, KIRILL  
Address 300 THREE ISLANDS BLVD  
STE 510  
City-State-Zip: HALLANDALE BEACH FL 33009

Title D  
Name LARINA, MARINA  
Address 300 THREE ISLANDS BLVD  
STE 510  
City-State-Zip: HALLANDALE BEACH FL 33009

Title VP/S  
Name LARINA, MARINA  
Address 300 THREE ISLANDS BLVD  
STE 510  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** KIRILL LARIN

**PRESIDENT**

**03/17/2018**

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

\_\_\_\_\_  
Date