


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 06, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 206558**

1. Entity Name  
**SLAVIK, INC.**



Principal Place of Business  
**32605 W. 12 MILE ROAD, SUITE 350  
FARMINGTON HILLS, MI 48334**

Mailing Address  
**32605 W. 12 MILE ROAD, SUITE 350  
FARMINGTON HILLS, MI 48334**



01182006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**38-6076195**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**CAPITAL CONNECTION, INC.  
417 E. VIRGINIA STREET., SUITE 1  
TALLAHASSEE, FL 32301**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

H00000421757  
02/16/06-80043-017 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LAURIA, DEL J. 32605 W. 12 MILE ROAD SUITE 350 FARMINGTON HILLS, MI 48334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS GOLD, ERIC A. 32605 W. 12 MILE ROAD, SUITE 350 FARMINGTON HILLS, MI 48334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T FRASCO, JOHN W. 32605 W. 12 MILE ROAD., SUITE 350 FARMINGTON HILLS, MI 48334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SLAVIK, RICHARD 32605 W 12 MILE ROAD FARMINGTON HILLS, MI 48334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP SLAVIK, STEPHAN F 32605 W 12 MILE ROAD FARMINGTON HILLS, MI 48334
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:** *Richard Slavik* **1/30/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #