2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 08:00 AM Secretary of State

DOCUMENT # P00000086980 1. Entity Name SONKZIATA, INC.		
2222 BARKWOOD CT — 222	ing Address 22 BARKWOOD CT KE MARY, FL 32746	
	<u> </u>	- 12000000000000000000000000000000000000
DO NOT WRITE IN	THIS SPACE	04052005 No Chg-P CR2E034 (10/03) 4. FEI Number 59-3670487 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Register ANNUNZIATA, DAVID 2222 BARKWOOD COURT LAKE MARY, FL 32746	ored Agent	DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the putthe obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if a	-5.7	ored agent, or both, in the State of Florida. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing \$5 Trust Fund Contribution. Add	0.00 May Be ded to Fees
10. OFFICERS AND DIRECT TITLE P NAME ANNUNZIATA, DAVID J STREET ADDRESS CITY-ST-ZIP LAKE MARY, FL 32746 TITLE NAME STREET ADDRESS	ORS	000000328668 04/25/05-80085-025 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO_NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filin indicated on this report or supplemental report is true an of the corporation or the raceiver of trushe embowered to changed, or on an attachment with an address, with all of the corporation of the corporation or the raceiver of trushed and the corporation of the co	g does not qualify for the exemption stated in Sed accurate and that my signature shall have the o execute his report as required by Chapter 607 ther fike empowered.	action 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE SIGNATURE AND TYPED OR PRINTED IN	AME OF SIGNING OFFICER OR DIRECTOR	4/20 05 407-832-8665 Date Daytine Phone #