2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State

ANNOAL REPORT											U = ~ U		
DOCUMENT # P00000095313 1. Entity Name KASZUBOWSKI, INC.									04-28-200	8 90380 ()14 ***15	0.00	
Principal Place of Business				Mailing Address				4000	36263				
3847 VIRGA BLVD Sarasota, Fl. 34233			3847 VIRGA BLVD Sarasota, Fl. 34233										
oras so in, i	16 34200		,	MV5017, 12 34233				1 (8 8)(8 8) 11		SOM SOME IBIOS			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			<u>. </u>						
Suite, Apt. #, etc.			;	Suite, Apt. #, etc.				04092008	Chg-P	CR2E	034 (12/06)		
City & State				City & State				4. FEI Numb 59-367	-		⊢	oplied For ot Applicable	
Zip	Country			Zip Cou				5. Certificate	of Status Desired		\$8.75 Add	ditional d	
	6. Name a	and Address of Curren	t Regis	gistered Agent				7. Name and	Address of New	Registered	Agent		
4492 GOL	ISKI, YOLA DEN LAKE	∕ÓR					Name KASZVBOUSKA ELZBIETA Street Address (P.O. Box Number is Not Acceptable)						
SARASOTA, FL 24233						38	847	VIRC	5-17 B	ND.			
8. The above named entity submits this statement for the purpose of changing its registered office or regi							5A6	PASOTI	}-	Fl	Zip Cod	4233	
The above the obligat	named entity tions of registe	submits this statement for Fred agent.	for the p			ed office or	register	ed agent, or bo	th, in the State of	Florida, I am	familiar with,	and accept	
SIGNATURE LANGE KASZUBOUSKA ELZBIETA /													
	arginatore, types o	printed rearie of registered agen	it and title i	appacable. (NOTE	:: Hegistere	d Agent signati	rre required	when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.						ncing		00 May Be ed to Fees					
10.		OFFICERS AND	DIREC	TORS	11.			ADDITIONS	CHANGES TO O	FFICERS AN	D DIRECTOR	S IN 11	
TITLE NAME	P KASZUBO	WSKA ELZRIETA		☐ Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS	KASZUBOWSKA, ELZBIETA 3847 VIRGA BLVD					ET ADDRESS							
CITY-ST-ZIP	SARASOTA, FL 34233					-ST-ZIP							
TITLE NAME	VP KASZUBO	WSKI, FRANCISZEK		☐ Delete	TITLE						Change	Addition	
STREET ADDRESS					STRE	et address							
CITY-ST-ZIP	SARASOI	A, FL 34233		☐ Delete	TITLE	-ST-ZIP	540	RETARY	···	<u>.</u>	Change	- Maddition	
NAME				Delete	NAM		Va	czananil	SKI SLAH	OMIR		- Modition	
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS - ST - ZIP	118	5 VILL	AGIO CI A FL	RCLE 3622	· ¬		
TITLE		, N		☐ Delete	TITLE		21	FEITS OT	it PC	3763	☐ Change	Addition	
NAME AVECT ADDRESS					NAM								
STREET ADDRESS CITY-ST-ZIP						ET ADORESS - ST- ZIP							
TITLE				☐ Delete	TITLE						☐ Change	Addition	
NAME STREET ADDRESS					NAMI STRE	E Et address							
CITY-ST-ZIP						-ST-ZIP							
TITLE NAME				☐ Delete	TITLE						Change	Addition	
STREET ADDRESS					NAM	ET ADDRESS							

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 charged, or on an attact my name appears in Block 10 or Block 11 if

CITY-ST-ZIP

SIGNATURE: PRESIDENT 194/25/08

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