

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000095993			
1. Entity Name VLADORA DESIGNS, INC.			
Principal Place of Business 1101 HOLLAND DRIVE UNIT NO. 20 BOCA RATON, FL 33487		Mailing Address 1101 HOLLAND DRIVE UNIT NO. 20 BOCA RATON, FL 33487	
DO NOT WRITE IN THIS SPACE			
			03062006 No Chg-P CR2E034 (11/05)
4. FEI Number 01-0624138		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent GROUEVA, TEODORA G 1101 HOLLAND DRIVE UNIT NO. 20 BOCA RATON, FL 33487			DO NOT WRITE IN THIS SPACE
9. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			DO NOT WRITE IN THIS SPACE
TITLE	D		
NAME	GROUEVA, TEODORA G		
STREET ADDRESS	1101 HOLLAND DRIVE UNIT NO. 20		
CITY-ST-ZIP	BOCA RATON, FL 33487		
TITLE			
NAME			
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NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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: 		TEODORA G. GROUEVA 03/06/06 561-784-3149	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	