


**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      Mailing Address  
1101 HOLLAND DRIVE UNIT NO. 20      1101 HOLLAND DRIVE UNIT NO. 20  
BOCA RATON, FL 33487      BOCA RATON, FL 33487

**DO NOT WRITE IN THIS SPACE**



03062006    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
01-0624138      Not Applicable

5. Certificate of Status Desired        \$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

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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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GROUEVA, TEODORA G
STREET ADDRESS	1101 HOLLAND DRIVE UNIT NO. 20
CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TEODORA G GROUEVA  
04/25/06-80062-004 150.00

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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: TEODORA G. GROUEVA    03/06/06    561-784-3149  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #