

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089944

FILED
Sep 06, 2006
Secretary of State

Entity Name: PODLOG HOLDING CO., INC.

Current Principal Place of Business:

375 POINCIANA ISLAND DRIVE
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

375 POINCIANA ISLAND DRIVE
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 03-0484581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PODLOG, MISHA
375 POINCIANA ISLAND DRIVE
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PODLOG, TATYANA
Address: 375 POINCIANA ISLAND DRIVE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP (X) Delete
Name: PODLOG, MISHA
Address: 375 POINCIANA ISLAND DRIVE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: S (X) Delete
Name: PODLOG, TATYANA
Address: 375 POINCIANA ISLAND DRIVE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: T (X) Delete
Name: PODLOG, MISHA
Address: 375 POINCIANA ISLAND DRIVE
City-St-Zip: SUNNY ISLAND BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: PODLOG, MISHA
Address: 375 POINCIANA ISLAND DRIVE
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MISHA PODLOG

PTSD

09/06/2006

Electronic Signature of Signing Officer or Director

Date