

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108223

Entity Name: PICINK, INC.

FILED  
Apr 10, 2007  
Secretary of State

## Current Principal Place of Business:

3890 TAMIAMI TRAIL  
B  
PORT CHARLOTTE, FL 33952 US

## New Principal Place of Business:

## Current Mailing Address:

3890 TAMIAMI TRAIL  
B  
PORT CHARLOTTE, FL 33952 US

## New Mailing Address:

FEI Number: 65-0873419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLIPATCHUK, ROMAN  
25157 LAHORE LANE  
PUNTA GORDA, FL 33983 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SLIPAT CHUK, ROMAN  
Address: 25157 LAMORE LANE  
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: D ( ) Delete  
Name: MARINOV, IAVOR  
Address: 674 SAXON BLVD.  
City-St-Zip: DELTONA, FL 32725 US

Title: D ( ) Delete  
Name: WOLOWEC, WOLODIMIR  
Address: 9223 GRACE LANE  
City-St-Zip: PHILADELPHIA, PA 19115 US

Title: D ( ) Delete  
Name: WOLOWEC, VERA  
Address: 9223 GRACE LANE  
City-St-Zip: PHILADELPHIA, PA 19115 US

Title: S ( ) Delete  
Name: MARINOV, KOUNKA  
Address: 674 SAXON BLVD.  
City-St-Zip: DELTONA, FL 32725 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SLIPATCHUK, ROMAN  
Address: 25157 LAHORE LANE  
City-St-Zip: PUNTA GORDA, FL 33983 US

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

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: ROMAN SLIPATCHUK

P

04/10/2007

Electronic Signature of Signing Officer or Director

Date