

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000113931

Entity Name: VK CARPENTRY INC

FILED
Nov 28, 2005
Secretary of State

Current Principal Place of Business:

8145 MOSSBORGER AVE
NORTH PORT, FL 34287

New Principal Place of Business:

8145 MOSSBORGER AVE
NORTH PORT, FL 34287 US

Current Mailing Address:

8145 MOSSBORGER AVE
NORTH PORT, FL 34287

New Mailing Address:

8145 MOSSBORGER AVE
NORTH PORT, FL 34287 US

FEI Number: 05-0536235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOSHMAN, VASILY
8145 MOSSBORGER AVE
NORTH PORT, FL 34287 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KOSHMAN, VASILY
Address: 8145 MOSSBORGER AVE
City-St-Zip: NORTH PORT, FL 34287

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOSHMAN, VASILY
Address: 8145 MOSSBORGER AVE
City-St-Zip: NORTH PORT, FL 34287 US

Title: VPS () Change (X) Addition
Name: KOSHMAN, OKSANA
Address: 8145 MOSSBORGER AVENUE
City-St-Zip: NORTH PORT, FL 34287 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VASILY KOSHMAN

P

11/28/2005

Electronic Signature of Signing Officer or Director

Date