

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000024447

Entity Name: IGOR KOVALTCHOUK, PA

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1400 CANOPY WALK LN  
APT. 1423  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

1400 CANOPY WALK LN  
APT. 1423  
PALM COAST, FL 32137

**New Mailing Address:**

FEI Number: 22-3894297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRIEBIS, DANIEL S  
3890 TURTLE CREEK DR STE B-1  
PORT ORANGE, FL 32127 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: DPVS  
Name: KOVALTCHOUK, IGOR  
Address: 1400 CANOPY WALK LN APT. 1423  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: KOVALTCHOUK, IGOR  
Address: 1400 CANOPY WALK LN APT. 1423  
City-St-Zip: PALM COAST, FL 32137

I hereby 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 all other like empowered.

SIGNATURE: IGOR KOVALTCHOUK

DPVS

04/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date