

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057265

FILED
Sep 27, 2004
Secretary of State

Entity Name: KARINA CORP, INC.

Current Principal Place of Business:

1015 ATLANTIC BLVD, STE 888
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

1015 ATLANTIC BLVD.
SUITE # 888
ATLANTIC BEACH, FL 32233 US

Current Mailing Address:

1015 ATLANTIC BLVD, STE 888
ATLANTIC BEACH, FL 32233

New Mailing Address:

1015 ATLANTIC BLVD, STE 888
SUITE # 888
ATLANTIC BEACH, FL 32233 US

FEI Number: 36-4534452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETRONI, GERARD
1879 BEACH AVE
ATLANTIC BEACH, FL 32233 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: PS () Delete
Name: PETRONI, KARINA
Address: 1015 ATLANTIC BLVD, STE 888
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DVT () Delete
Name: PETRONI, ERIK
Address: 1015 ATLANTIC BLVD, STE 888
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DV () Delete
Name: PETRONI, GERARD
Address: 1879 BEACH AVE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DV () Delete
Name: PETRONI, REIDUNN
Address: 1879 BEACH AVE
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ERIK PETRONI

DVT

09/27/2004

Electronic Signature of Signing Officer or Director

_____ Date