

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104145

Entity Name: NATALY ACHIDA INC.

FILED
Jul 02, 2004
Secretary of State

Current Principal Place of Business:

500 SE 2ND AVE
D23
DEERFIELD BCH, FL 33441

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 49
DEERFIELD BCH, FL 33443

New Mailing Address:

FEI Number: 14-1895761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACHIDA, NATALY
500 SE 2ND AVE
D23
DEERFIELD BCH, FL 33441 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: ACHIDA, NATALY
Address: 500 SE 2ND AVE # D23
City-St-Zip: DEERFIELD BCH, FL 33441

Title: VP () Delete
Name: ACHIDA, NATALY
Address: 500 SE 2ND AVE # D23
City-St-Zip: DEERFIELD BCH, FL 33441

Title: TREA () Delete
Name: ACHIDA, NATALY
Address: 500 SE 2ND AVE # D23
City-St-Zip: DEERFIELD BCH, FL 33441

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:

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: NATALY ACHIDA

PD

07/02/2004

Electronic Signature of Signing Officer or Director

Date