## 2006 FOR PROFIT CORPORATION

## Aug 16, 2006 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P03000112108** 07-21-2006 90022 035 \*\*\*150 00 1. Enuty Name BOJIDAR INC. Principal Place of Business Mailing Address **00049110** 2089 DELTA STREET 2089 DELTA STREET PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33952 US 2. Principal Place of Business 3. Mailing Address 208 PERIWINKLE ROAD 208 PERIWINKLE ROAD Suita, Apt. #, etc. Suite, Apt. #, etc. 07172006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Numbe Applied For VÉNICE, VENICE, 20-0293797 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34293 USA 34293 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOJIDAR ALEXIEV CALDWELL, OLGA Street Address (P.O. Box Number is Not Acceptable) 208 PERIWINKLE ROAD VENICE, FL 34293 208 PERIWINKLE ROAD VENICE 34293 8. 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. I am familier with, and accept the obligations of registered agent. 7.17.06 SIGNATURE. (NOTE, Registered Agent signature required when (unstating) FILE NOW!!! FEE IS \$550,00 9. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution. Due by September 6, 2006 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Colete me D.P Change TITLE ALEXIEV BOJIDAR Addition ALEXIEV, BOJIDAR NAME 208 PERIWINKLE ROAD 2089 DELTA STREET STREET ADDRESS STREET ANDRESS PORT CHARLOTTE, FL 33952 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE Oelele THLE Crange ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2/P C(1Y+S1+1.P Delete THE Change ☐ Addition NME NUM STREET ADDRESS STREET ADDRESS CTTY-ST-ZZP COTY-ST-ZIP TITLE ☐ Detete HILE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CRY-ST-ZIP CITY-ST-ZP TITLE Chance Addition TITLE ☐ Celete NAME NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes I further certify that the information indicated on this report or supplishential report is frue and accurate and that my 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 in Block 10 or Block 11 if chapter 607, it is not attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: \_

STREET ADDRESS CITY-ST-ZIP

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FILED



Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Jüly 17, 2006

To Whom it May Concern:

This letter is to inform you that this form is being submitted now as the owner is currently going through a divorce and the paperwork to file the Annual Report was not delivered to him on time.

Thank you,

Joan C. Walton