2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000060128

Entity Name: ATRONIX, CORP

FILED May 08, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
62 PITMAI PALM CO.	N DR. AST, FL 32164					
Current M	lailing Address	::	New Maili	New Mailing Address:		
62 PITMAN DR. PALM COAST, FL 32164				91 RAE DRIVE PALM COAST, FL 32164		
FEI Number: 20-0977997 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	d Address of C	ırrent Registered Agent:	Name and	d Address of	New Registered Agent:	
SUITE 8-C	NGS RD., N.	US				
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing	its registered	office or registered agent, or both,	
SIGNATU	RE: ELENA KO	DTOMIN				
	Electroni	c Signature of Registered Ag	ent		Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notic	ce.		
OFFICER	S AND DIRECT	ORS:	ADDITION	NS/CHANGE	S TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () DOVNAROVICH, 18 RYBAR LANE PALM COAST, F		Title: Name: Address: City-St-Zip:	DOVNAROVI 91 RAE DR		
Title: Name: Address: City-St-Zip:	VP () KAZAKOV, VICT 237 N. OLEANDI DAYTONA BEAC	ER AVE., APT 3	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	TR () KAZAKOV, VICT 237 N. OLEANDI DAYTONA BEAC	ER AVE., APT 3	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	SECR () DOVNAROVICH, 18 RYBAR LANE PALM COAST, F		Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: IOURI DOVNAROVICH P 05/08/2006