2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2005 8:00 am Secretary of State

DOCUMENT # P0400061369 1. Entity Name BALTIK CONSTRUCTIONS CORP,								05-04-2005 9	90162 031 **	**150.00
Principal Place	e of Busines	s	Mailing Addre	Mailing Address			-	-		
1901 COOLIDGE ST. HOLLYWOOD, FL 33020				1901 COOLIDGE ST. HOLLYWOOD, FL 33020			 			21)(8 181/28) (1 188)
2. Principal Place of Business			3. Mailing Add	3. Mailing Address						
Suite, Apt. #, etc.			Scite, Apt. #	Suite, Apt. #, etc.			04282005	Chg-P	CR2E034 (10	
City & State			City & State				4. FEI Numbe	81-0660	2121	Applied For Not Applicable
Zip		Country Zip		Country		5. Certificate of Status Desired S8.75 Additional Fee Required 7. Name and Address of New Registered Agent				
	and Address of Curr	ent Registered Agen	<u> </u>	Na Na	arne	7. Name and	Address of New Re	egistered Agent		
AMBRASK 1901 COO				•		Street Address (P.O. Box Number is Not Acceptable)				
HOLLYWO										
			Ci	ity			FL Zi	o Code		
8. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept										
SIGNATURE (SAULIUS AMBRASKA) 04/29/05										
Signature, type or punits name of registerior agents and title it applicable. (NOTE: Registered Agent signature required when reinstating) OATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	,	OFFICERS A	ND DIRECTORS		11.		ADDITIONS/	CHANGES TO OFFI		
ITLE IIAME	P Delete TITI								ci	hange 🔲 Addition
STREET ADDRESS	STREET ADDRESS 1901 COOLIDGE ST. OITY-ST-ZIP HOLLYWOOD, FL 33020				STREET ADI	- 1				
ITLE	Delete TITL									hange
ITREET ADDRESS	aree			NAME Street a		naecc				
ITY-ST-ZIP					CITY-ST-7	- 1				
11th	☐ Detete 11TL								□ c	hange 🔲 Addition
TREET ADDRESS					STREET AD	ORESS				
ITY-ST-ZIP				Datas	CHY-ST-Z	ZIP		•		hange
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'ITLE				Delete	TITLE				□ c	hange
::TREET ADDRESS					NAME STREET AD	DDRESS				
CITY-ST-ZIP					CHY-ST-Z	ZIP				
ITLE HAME	ļ			Delete	TITLE NAME	İ		i	□ C	hange 🗌 Addition
TREET ADDRESS					STREET AD	ı				
12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the Aceiver 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 changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: SIGNATURE OF FRANCE OF SIGNING OFFICER OR DIRECTOR DAYLING PROPERTY.										