## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000010636

City-St-Zip:

GAINESVILLE, FL 32601

FILED Sep 05, 2006 Secretary of State

Entity Nar	me: KIRSIKKA	s, INC.			
Current P	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
	9TH TERRACE LLE, FL 32601				
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
	9TH TERRACE LLE, FL 32601				
FEI Number:	20-2199235	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HYTONEN, ALAN J 2011 SW 9TH TERRACE GAINESVILLE, FL 32601 US				HYTONEN, ALEXIS E 2011 SW 9TH TERRACE GAINESVILLE, FL 32601 US	
	named entity s e of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: ALEXIS HYTONEN				09/05/2006	
Electronic Signature of Registered Agent			ent	Date	
		8(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () HYTONEN, ALA 2011 SW 9TH T GAINESVILLE, I	ERRACE	Title: ( Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D () PEARSON, GAF 2011 SW 9TH T GAINESVILLE, I	ERRACE	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D () HYTONEN, ALE 2011 SW 9TH T		Title: ( Name: Address:	( ) 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.

City-St-Zip:

SIGNATURE: ALEXIS HYTONEN D 09/05/2006