


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P05000012939  
1. Entity Name  
TZX CORPORATION



Principal Place of Business: 7615 RIVER OAK RUN, 101 BRADENTON, FL 34202  
Mailing Address: PO BOX 20875, BRADENTON, FL 34204

**DO NOT WRITE IN THIS SPACE**



04202008 No Chg-P CR2E034 (11/05)

4. FEI Number: 20-2232595  
Applied For:  Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
SAMPALIK, EVA  
7615 RIVER OAK RUN  
101  
BRADENTON, FL 34202

**DO NOT WRITE IN THIS SPACE**

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 familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when restateing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	OWN
NAME	SAMPALIK, EVA
STREET ADDRESS	7615 RIVER OAK RUN #101
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	OWN
NAME	SAMPALIK, VLADIMIR
STREET ADDRESS	7615 RIVER OAK RUN #101
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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05/13/08-80019-011 150.00

12. I hereby 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 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 4-20-08 941-371-3175  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #