2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000016837

Address:

City-St-Zip:

7 FITZGERALD LANE

PALM COAST, FL 32137

Entity Name: THUMBS UP CONSTRUCTION INC

FILED Apr 24, 2006 Secretary of State

y	mer mombo	or correction, iivo.				
Current P	rincipal Place	of Business:	New Princ	ipal Place of Busir	ess:	
	IOGUE LANE AST, FL 32164	US				
Current M	lailing Address	s:	New Mailii	ng Address:		
	IOGUE LANE AST, FL 32164	US				
FEI Number	: 20-2264576	FEI Number Applied For ()	FEI Number Not Appli	icable () Certif	icate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New R	egistered Agent:	
	TOLIY V IOGUE LANE AST, FL 32164	US				
	named entity s e of Florida.	ubmits this statement for the	purpose of changing it	s registered office o	r registered agent, or bot	
SIGNATUI	RE:					
	Electroni	c Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () KIM, ANATOLIY 29 PATCHOGUE PALM COAST, F	LANE	Title: Name: Address: City-St-Zip:	()Chang	e () Addition	
Title: Name: Address: City-St-Zip:	T () LUKHMANOV, LI 164 PALM WOO PALM COAST, F	D DRIVE	Title: Name: Address: City-St-Zip:	S (X) Chang LALETIN, SERGEY S 186 BELLEAIRE DR PALM COAST, FL 321	e () Addition	
Title: Name: Address: City-St-Zip:	S () YAKHNOVSKAY, 29 PATCHOGUE PALM COAST, F	LN	Title: Name: Address: City-St-Zip:	S (X) Chang CHURAKOV, ALEKSAN 85 BRUNSWICK LANE PALM COAST, FL 321		
Title: Name:	T (X) ZYUKIN, VYACH	Delete ESLAV	Title: Name:	()Chang	e () 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.

Address:

City-St-Zip:

SIGNATURE: ANATOLIY KIM P 04/24/2006