## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000070507

SHVANK, HALYNA

4020 SW 72 DR. DAVIE, FL 33314

Name: Address:

City-St-Zip:

Entity Name: KARPATY, INC.

FILED Jan 08, 2011 Secretary of State

| Current Principal Place of Business:          |  |                                  | New Principal Place of Business:          |  |
|---|--|----------------------------------|---|--|
| 4020 SW 7<br>DAVIE, FL                        |  |                                  |   |  |
| Current Mailing Address:                      |  |                                  | New Mailing Address:                      |  |
| 4020 SW 7<br>DAVIE, FL                        |  |                                  |   |  |
| FEI Number:                                   | 83-0429369                                       | FEI Number Applied For()         | FEI Number Not Applicable ( )             | Certificate of Status Desired ( )      |
| Name and Address of Current Registered Agent: |  |                                  | Name and Address of New Registered Agent: |  |
| SHVANK,<br>4020 SW 7<br>DAVIE, FL             |  | 8                                |   |  |
|   | named entity<br>e of Florida.                    | submits this statement for the p | ourpose of changing its registered        | d office or registered agent, or both, |
| SIGNATUR                                      | RE:  |                                  |   |  |
|   | Electro  | nic Signature of Registered Ago  | ent                                       | Date                                   |
| OFFICERS                                      | S AND DIREC                                      | CTORS:                           |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P<br>SHVANK, MYR<br>4020 SW 72 I<br>DAVIE, FL 33 | DR.                              |   |  |
| Title:  | S  |                                  |   |  |

I hereby 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 all other like empowered.

SIGNATURE: HALYNA SHVANK S 01/08/2011