

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 30, 2006 8:00 am**  
**Secretary of State**

03-30-2006 90031 008 \*\*\*150.00

**DOCUMENT # P05000127151**

1. Entity Name

AMA GROUP, INC



Principal Place of Business

29 LAGARE STR  
PALM COAST FL 32137  
US

Mailing Address

29 LAGARE STR  
PALM COAST FL 32137

2. Principal Place of Business

21 RAINTREE CIR

Suite, Apt. #, etc.

3. Mailing Address

21 RAINTREE CIR

Suite, Apt. #, etc.

City & State

PALM COAST

Zip  
32164

Country  
FL

City & State

PALM COAST

Zip  
32164

Country  
FL

4. FEI Number

20-3648127

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

1st MOORE

CR2E034 (10/05)



6. Name and Address of Current Registered Agent

SKUDARNOV, IGOR  
156 RAINTREE CIRCLE  
PALM COAST FL 32164

7. Name and Address of New Registered Agent

Name  
ABAIMOVA, ELENA

Street Address (P.O. Box Number is Not Acceptable)

21 RAINTREE CIR

City  
PALM COAST

FL

Zip Code  
32164

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

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

03/20/06

**FILE NOW!!! FEE IS \$150.00.**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

P  
ABAIMOV, VLADIMIR  
29 LAGARE STR  
PALM COAST FL 32137

TITLE NAME ☐ Delete

VP  
ABAIMOVA, ELENA  
29 LAGARE STR  
PALM COAST FL 32137

TITLE NAME ☐ Delete

VP  
MEDNIKOV, YEFIM  
29 LAGARE STR  
PALM COAST FL 32137

TITLE NAME ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition

P  
ABAIMOV, VLADIMIR  
21 RAINTREE CIR  
PALM COAST FL 32164

TITLE NAME ☒ Change ☐ Addition

VP  
ABAIMOVA, ELENA  
21 RAINTREE CIR  
PALM COAST FL 32164

TITLE NAME ☐ Change ☐ Addition

VP  
MEDNIKOV, YEFIM  
29 LAGARE STR  
PALM COAST FL 32137

TITLE NAME ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*[Signature]*

03/20/06