2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P06000028910

1. Entity Name



FILED Apr 20, 2007 8:00 am Secretary of State

04-20-2007 90093 047 ***150.00

LADIŚKY	MANAGEMENT CO			9	
Principal Plac 4762 SW 13 DEERFIELD E		Mailing Address 4762 SW 13TH CT DEERFIELD BEACH, FL	33442		
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03202007 Chg-P CR2E034 (12/06)	
City & Stat	e	City & State		4. FEI Number Applied For Not Applied For Not Applied	ble
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current	t Registered Agent		7. Name and Address of New Registered Agent	
D. D. D	DIGITAGO		Name	· · · · · · · · · · · · · · · · · · ·	
	RICHARD 5TH STREET ION, FL 33324		Street Address	s (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	\dashv
8. The above the obligat	named entity submits this statement filions of registered agent.	or the purpose of changing its r	registered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept	pt
SIGNATURE.	Signature, typed or printee name of registered agen	t and title if applicable. (NOTE	Registered Agont signature require	reg when reinstating) DATE	ļ
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550	9. Election Campaig Trust Fund Contri		5.00 May Be dded to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DO	☐ Delete	TITLE	☐ Change ☐ Additi	ion
NAMÉ	LADISKY, MARK		NAME		
STREET ADDRESS	4762 SW 13TH CT		STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	Change Additi	ion
NAME STREET ADDRESS			NAME STREET ADORESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		□ Delete	TITLE	☐ Change ☐ Additi	ion
NAME			NAME		
STREET, ADDRESS.			STREET ADDRESS	_	
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Additi	ion
NAMÉ			NAME		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS		
<u> </u>			CITY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ Additi	ion
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Additi	inn
NAME		Lad Details	NAME	Lyanila Tyunin	.511
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
42		the Africa Citizen and a series of the Con-		ed in Chanter 119. Florida Statutes. I further certify that the information	\dashv

indicated on this report or supplied with this filing does not quality 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.