

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000070296

Entity Name: DA VINCI ONE, INC.

FILED
Mar 15, 2007
Secretary of State

Current Principal Place of Business:

1876 N. UNIVERSITY DRIVE
SUITE # 200-E
PLANTATION, FL 33322

New Principal Place of Business:

1800 OLD MOODY BLVD.
BUNNELL, FL 32110

Current Mailing Address:

1876 N. UNIVERSITY DRIVE
SUITE # 200-E
PLANTATION, FL 33322

New Mailing Address:

PO BOX 350883
PALM COAST, FL 32135

FEI Number: 20-4892456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHOFSKY AND ASSOCIATES, PA
1876 N. UNIVERSITY DRIVE
SUITE 200-E
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

ROVDER, LUKAS
435 CABERNET PL
SAINT AUGUSTINE, FL 32084 US

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.

SIGNATURE: LUKAS ROVDER

03/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROVDER, LUKAS
Address: 1876 N. UNIVERSITY DRIVE # 200-E
City-St-Zip: PLANTATION, FL 33322

Title: V () Delete
Name: SKORYKH, VLADISLAV
Address: 1876 N. UNIVERSITY DRIVE 200-E
City-St-Zip: PLANTATION, FL 33322

Title: V (X) Delete
Name: BAGAEV, VICTOR
Address: 1876 N. UNIVERSITY DRIVE 200-E
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROVDER, LUKAS
Address: PO BOX 350883
City-St-Zip: PALM COAST, FL 32135

Title: VD (X) Change () Addition
Name: KOMPANCHENKO, TIMOTHY
Address: PO BOX 350883
City-St-Zip: PALM COAST, FL 32135

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: LUKAS ROVDER

P

03/15/2007

Electronic Signature of Signing Officer or Director

Date