

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096415

Entity Name: STONKA INC.

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

3101 BEERIDGE ROAD APT 221
SARASOTA, FL 34239

New Principal Place of Business:

570 BRIARWOOD RD
VENICE, FL 34293

Current Mailing Address:

3101 BEERIDGE ROAD APT 221
SARASOTA, FL 34239

New Mailing Address:

570 BRIARWOOD RD
VENICE, FL 34293

FEI Number: 22-3938671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KWAPISZ, PAWEL
Address: 3101 BEERIDGE ROAD APT 221
City-St-Zip: SARASOTA, FL 34239

Title: DST () Delete
Name: SZCZEPANSKI, WITOLD
Address: 3101 BEERIDGE ROAD APT 221
City-St-Zip: SARASOTA, FL 34239

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KWAPISZ, PAWEL
Address: 570 BRIARWOOD RD
City-St-Zip: VENICE, FL 34293

Title: DS (X) Change () Addition
Name: SZCZEPANSKI, WITOLD
Address: 1817 PARAKEET WAY #506
City-St-Zip: SARASOTA, FL 34232

Title: T () Change (X) Addition
Name: SADOWSKA, AGNIESZKA
Address: 1817 PARAKEET WAY #506
City-St-Zip: SARASOTA, FL 34232

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: SZCZEPANSKI

DS

04/20/2007

Electronic Signature of Signing Officer or Director

Date