## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 10, 2008 08:00 Al Secretary of State DOCUMENT # P06000139485 1. Entity Name DOUGLAS CHORNA, INC. Principal Place of Business Mailing Address 4794 VALENCIA DR. 4794 VALENCIA DR. DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445 US CR2E034 (11/05) 03312008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5836342 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHORNA, DOUGLAS DO NOT WRITE 4794 VALENCIA DR. DELRAY BEACH, FL 33445 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. <del>სიიიიი890081</del> TITLE 04/22/03-80080-025 150.00 NAME CHORNA, DOUGLAS STREET ADDRESS 4794 VALENCIA DR. CITY-ST-ZIP DELRAY BEACH, FL 33445 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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.

INTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED