## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000009069

SVITAKOVA, MARKETA

4400 PGA BLVD SUITE 900

PALM BEACH GARDENS, FL 33410 US

Name:

Address:

City-St-Zip:

FILED Sep 16, 2009 Secretary of State

Entity Name: LAYTHAM INVESTMENT, INC.							
Current Principal Place of Business:					New Principal Place of Business:		
4400 PGA 900 PALM BEA	BLVD ACH GARDEN	S, FL 33410	US				
Current Mailing Address:					New Mailing Address:		
4400 PGA 900 PALM BEA	BLVD ACH GARDEN	S, FL 33410	US				
FEI Number:	: 26-1990220	FEI Number A	pplied For()	FEI Num	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
FORM-A-CORP 4400 PGA BLVD 900 PALM BEACH GARDENS, FL 33410 US					AGENTS AND CORPORATIONS, INC. 300 FIFTH AVENUE SOUTH 101-330 NAPLES, FL 34102 US		
	named entity e of Florida.	submits this sta	atement for the p	urpose of	changing its register	red office or registered agent, or both,	
SIGNATURE: AGENTS AND CORPORATIONS, INC.						09/16/2009	
	Electror	nic Signature of	Registered Age	nt		Date	
			corporation did no	t receive th	e prior notice.		
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SVITAK, JIRI 4400 PGA BLV	) Delete D SUITE 900 GARDENS, FL 33	410 US		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SVITAKOVA, S 4400 PGA BLV		410 US		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	lame: SVITAKOVA, SÓNA kddress: 4400 PGA BLVD SUITE 900				Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	DS (	) Delete			Title <sup>.</sup>	( ) Change ( ) Addition	

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

Name:

Address:

City-St-Zip:

SIGNATURE: JIRI SVITAK DP 09/16/2009