

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000077301

1. Entity Name
KRAJINA, INC.



Principal Place of Business

61 S TURN CIRCLE
PONCE INLET, FL 32127 US

Mailing Address

61 S TURN CIRCLE
PONCE INLET, FL 32127-7251 US

DO NOT WRITE IN THIS SPACE



01222007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3212587

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAKIC, DANICA
61 S TURN CIRCLE
PONCE INLET, FL 32127

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and the if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LAKIC, MIROSLAV
STREET ADDRESS 61 S TURN CIRCLE
CITY-ST-ZIP PONCE INLET, FL 32127

TITLE VTD
NAME LAKIC, DANICA
STREET ADDRESS 61 S TURN CIRCLE
CITY-ST-ZIP PONCE INLET, FL 32127

TITLE S
NAME MIRO, LAKIC
STREET ADDRESS 61 S TURN CIRCLE
CITY-ST-ZIP PONCE INLET, FL 32127

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000606092
01/30/07-80064-016 150.00

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IN THIS SPACE**

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.

SIGNATURE:

Miroslav Lakic

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-2007 386 322-3396

Date

Daytime Phone #