

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000068714

Entity Name
SAK CORPORATION INC.



Principal Place of Business
**5318 19 AVE S
GULF PORT, FL 33707 US**

Mailing Address
**5318 19 AVE S
GULF PORT, FL 33707 US**



01172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3400512	Applied For (Not Applicable)
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**VOLODYMYR, SAK
5318 19TH AVE. N.
GULFPORT, FL 33707**

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I, 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: *Volodymyr SAK* DATE: 1/18/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
AFTER May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

OFFICERS AND DIRECTORS

NAME	D SAK, VOLODYMYR
HOME ADDRESS	5318 19 AVE S
CITY-STATE-ZIP	GULF PORT, FL 33707

U00000397327
01/30/06-80044-020 150.00

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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: *Volodymyr SAK* DATE: 1/18/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR