## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Mar 15, 2006 8:00 am Secretary of State DOCUMENT # P97000097738 1. Entity Name 03-15-2006 90101 004 \*\*\*150.00 KURRONEN, INC. Principal Place of Business Mailing Address 2951 LAKE TOHOPEKALIGA BLVD. KISSIMMEE FL 34749 2951 LAKE TOHOPEKALIGA BLVD KISSIMMEE FL 34746 2. Principal Place of Business 3. Mailing Address 4911 Emilee Grace Lane <u> 4911</u> Emilee Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 59-3478238 Saint Cloud Florida Not Applicable Saint Country \$8.75 Additional 5. Certificate of Status Desired 34771 Osceola Fee Required Osceola 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name rroner KURRONEN, ANTTI ress (P.O. Box Number is Not Acceptable) 713 BUNKER LANE KISSIMMEE FL 34759 Cloud 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. Fam familiar the obligations of registered SIGNATURE Signature, typed or printed name of registered agent and title it applicable INOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00. 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PTS TITLE Change : ☐ Delete NAME KURRONEN, ANTTI K NAME 4911 Emilee Gace Lane STREET ADDRESS STREET ADDRESS 2951 LAKE TOHOPEKALIGA BLVD CITY-ST-ZIP KISSIMMEE FL 34746 CITY-ST-ZIP SAIN+ Cloud ☐ Delete THILE Addition NAME KURRONEN, CONSTANCE R NAME 4911 Emilee Grace lane STREET ADDRESS STREET ADDRESS 2951 LAKÉ TOHOPEKALIGA BLVD CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34746 Cloud 34771 Addition TITLE TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP THILE Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition ☐ Defete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Date

Daytime Phone #

## ATTACHMENT 40032123

Kurronen Inc. 4911 Emilee Grace Lane Saint Cloud, Florida 34771

To Whom It May Concern:

Please change mailing address for Kurronen Inc. EIN # 59-3478238

OLD ADDRESS: 2951 Lake Tohopekaliga Blvd. Kissimmee, Florida 34746

NEW ADDRESS: 4911 Emilee Grace Lane Saint Cloud, Florida 34771

Thank you,

Antti Kurronen fall 3/4/06