


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 20, 2006 8:00 am
Secretary of State**

03-03-2006 90124 004 ***150.00

DOCUMENT # P98000107086		
1. Entity Name NORIK B. CORP.		
Principal Place of Business 2104 LIME TREE DR EDGEWATER, FL 32141		Mailing Address P.O. BOX 1117 EDGEWATER, FL 32132
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BAGDASARIAN, NORIK 2104 LIME TREE DR. EDGEWATER, FL 32141		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		
FILE NOW!!! FEB IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BAGDASARIAN, NORIK PO BOX 1117 EDGEWATER, FL 32132	
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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: <u>Norik Bagd</u>		Date <u>3-14-06</u> Daytime Phone # <u>386 423 8140</u>



02112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3555413	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

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ATTACHMENT

6600 5953

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2006

NORIK B. CORP.
P.O. BOX 1117
EDGEWATER, FL 32132

Subject: **NORIK B. CORP.**

Reference Number: **P98000107086**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH
ANNUAL REPORTS SECTION