2008 FOR PROFIT CORPORATION

FILED Apr 24, 2008 8:00 am Secretary of State

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	AN	NUA	\L	KEP (JRI		

DOCUMENT # P9900007458 1. Entity Name GREAT MORAVIA CORP.							04-24-2008	_	04 ***15	0.00	
District Name of Provinces					40010	JJJ					
Principal Place of Business 6617 STEWART AVE. SAINT PETERSBURG, FL 33702		661	Mailing Address 6617 STEWART AVE. SAINT PETERSBURG, FL 33702			100					
							100000180	TILE JULI POM ČEŠI ČŽIT	1991 ITM 189	N 1111 1 111 111	
2. Principal Place of Business - No P.O. Box #			3. Ma	3. Mailing Address							
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			01152008	Chg-P	CR2E03	34 (12/06)	
City & State			Cit	City & State			4. FEI Numbe 59-3551			_ 	plied For t Applicable
Zip		Country Zip Cour		Coun	try	5. Certificate	of Status Desired		\$8.75 Addi Fee Required		
	6. Name	and Address of Curren	nt Register	red Agent			7. Name and	Address of New R	egistered A	gent	
1 4 5 11 12 4 1	EVET					Name					
LANIK, ALEXEJ 6617 STEWART AVE. SAINT PETERSBURG, FL 33702					Street Address (P.O. Box Number is Not Acceptable)						
O, 1		10,12 00/02									
		:				City FL Zip Code					
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 age	ent and title if ap	oplicable. (NOT	É: Registere	d Agent signature required	d when reinstating)		DATE		
FIL After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 8 Fee will be \$550	0.00	9. Election Campa Trust Fund Cont	-		.00 May Be led to Fees				;
10	:	OFFICERS AN	D DIRECT	ORS	11.		ADDITIONS/	CHANGES TO OFFI	CERS AND	DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP		LEXEJ EWART AVE ETERSBURG, FL 337	702	. Delete		I				Change	☐ Addition
TITLE	VP			☐ Delete	TITL					☐ Change	Addition
NAME		VA, PAULA		□ Dolete	NAM	I					—
STREET ADDRESS	6617 STE	WART AVE.			STRE	ET ADORESS					
CITY-ST-ZIP	SAINT PE	TERSBURG, FL 337	702		ÇITY	-\$T-ZIP	<u> </u>				
TITLE				☐ Delete	TITL	·				Change	☐ Addition
STREET ADDRESS					1	ET ADORESS					
CITY-SI-ZIP_					-i -	-ST-ZIP				☐ Change	Addition
TITLE NAME				☐ Delete	TITL.	I				Unaityo	☐ Addition
STREET ADDRESS					- 5	ET ADDRESS					
CITY-ST-ZIP					CITY	-ST-ZIP					
TITLE				☐ Delete	TITU	- 1				☐ Change	☐ Addition
NAME STREET ADDRESS					NAM	- 1					
CITY-ST-ZIP						ET ADDRESS -ST-ZIP					:
TITLE				☐ Delete	TITL					☐ Change	Addition
NAME STREET ADDRESS					NAM STRE	ET ADDRESS					
CITÝ-ST-ZIP		-			CITY	-ST-ZIP					
indicated	on this read	ne information supplied wort or supplemental report the receiver or trustee emachment with an address	t is true and	d accurate and that i	mv sinna	ture shall have the	same legal effec	Florida Statutes. I t as if made under of s; and that my name	further cert path; that I a appears in	ify that the in im an officer n Block 10 or	iformation or director Block 11 if