

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000083510

Entity Name: CZAR CAPITAL INC.**Current Principal Place of Business:**7140 CAPTAIN KIDD AVE
SARASOTA, FL 34231**Current Mailing Address:**7140 CAPTAIN KIDD AVE.
SARASOTA, FL 34231 US**FEI Number: 26-3344049****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD.
A-100
TAMPA, FL 33612 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRES
Name	LUKIANOFF, MICHAEL
Address	2807 W. PRICE AVE. #6
City-State-Zip:	TAMPA FL 33611

Title	SEC
Name	LUKIANOFF, MICHAEL
Address	2807 W. PRICE AVE. #6
City-State-Zip:	TAMPA FL 33611

Title	TRES
Name	LUKIANOFF, MICHAEL
Address	2807 W. PRICE AVE. #6
City-State-Zip:	TAMPA FL 33611

Title	VP
Name	MARTIN, LAURA L
Address	7140 CAPTAIN KIDD AVE.
City-State-Zip:	SARASOTA FL 34231

Title	SEC
Name	MARTIN, LAURA L
Address	7140 CAPTAIN KIDD AVE.
City-State-Zip:	SARASOTA FL 34231

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LAURA L MARTIN**VP****04/03/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date