## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000040913

Entity Name: BELARUS, INC.

FILED Feb 11, 2009 Secretary of State

Current Pri	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
	ATE ROAD 7 OD, FL 33021			18555 COLLINS AVE #100 SUNNY ISLES, FL 33160		
Current Ma	ailing Address	::	New Maili	New Mailing Address:		
17150 COLLINS AVE #10124 SUNNY ISLES BEACH, FL 33160			18555 COLLINS AVE #100 SUNNY ISLES BEACH, FL 33160			
FEI Number:	56-2345887	FEI Number Applied For ( ) FEI Nu	mber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of Cเ	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
	, ALEX ATE ROAD 7 OD, FL 33021	US	3363 NE 16	VORONA, INNA 3363 NE 163 STREET STE 804 N. MIAMI, FL 33160 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: INNA VORONA				02/11/2009		
	Electronic	Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CHAIKOUSKI, SI	AVENUE #101240	Title: Name: Address: City-St-Zip:	P (X) CHAIKOUSKI, S 18555 COLLINS SUNNY ISLES, F	AVE #100	
Title: Name: Address: City-St-Zip:	MAKITOVA, ELEI	AVENUE # 101240	Title: Name: Address: City-St-Zip:	S (X) MAKITOVA, ELE 18555 COLLINS SUNNT ISLES, F	AVE #100	
Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	VP () CHAIKOVSKAYA 18555 COLLINS SUNNY ISLES, F	AVE #100	
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Title: Name: Address: City-St-Zip:	()[	Delete	Title: Name: Address: City-St-Zip:	S () CHAIKOVSKI, NI 18555 COLLINS SUNNY ISLES, F	AVE #100	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SIARHEI CHAIKOUSKI P 02/11/2009