

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

'95 MAR 14 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000088786 (6)**

1. Corporation Name  
**YOULAY, INC.**

Principal Place of Business  
**2701 SW LEJEUNE ROAD STE. 410  
CORAL GABLES FL 33134**

Mailing Address  
**2701 SW LEJEUNE ROAD STE. 410  
CORAL GABLES FL 33134**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified  
**12/05/1994**

3a. Date of Last Report

4. FEI Number  
**applied for**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business  
21  
Suite, Apt. #, etc.  
22  
City & State  
23  
Zip  
24  
Country  
25

2a. Mailing Address  
26  
Suite, Apt. #, etc.  
27  
City & State  
28  
Zip  
29  
Country  
30

9. Name and Address of Current Registered Agent

**DERNIS, MARTIN M ESQ.  
2701 SW LEJEUNE ROAD STE. 410  
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0105, Florida Statutes.

SIGNATURE *Martin M. DERNIS*

DATE **3-1-95**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**  
NAME **DERNIS, MARTIN M ESQ.**  
STREET ADDRESS **2701 SW LEJEUNE ROAD STE. 410**  
CITY-ST-ZIP **CORAL GABLES FL 33134**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE **PERFORMER**  Change  Addition  
1.2 NAME **IOURI VASILEVSKI**  
1.3 STREET ADDRESS **2701 SW LEJEUNE ROAD**  
1.4 CITY-ST-ZIP **CORAL GABLES, FL 33134**

2.1 TITLE **SECRETARY**  Change  Addition  
2.2 NAME **LARISA KOZUNTSOVA**  
2.3 STREET ADDRESS **2701 S.W. LEJEUNE ROAD**  
2.4 CITY-ST-ZIP **CORAL GABLES, FL 33134**

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Iouri Vasilevski*

**Iouri Vasilevski**

DATE **3-1-95**

DATE **305-446-1122**

DATE

DATE