

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90096 028 ***150.00

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DOCUMENT # P99000065427

1. Entity Name
BALAN COMPANY INTERNATIONAL OF FLORIDA

Principal Place of Business 4900 N. OCEAN BLVD. #1411 FORT LAUDERDALE FL 33308	Mailing Address 4900 N. OCEAN BLVD. #1411 FORT LAUDERDALE FL 33308
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DUPLICATE



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 65-0944003		Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent GVINEPADZE, KAKHA 4900 N. OCEAN BLVD. #1411 FORT LAUDERDALE FL 33308				7. Name and Address of New Registered Agent Name Balan, George Street Address (P.O. Box Number is Not Acceptable) 4900 N. Ocean Blvd. # 1411 City Ft. Lauderdale FL Zip Code 33308			
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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.
 SIGNATURE *George* DATE 01/19/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete TODOROCHKO, NATALIA 10/1 LETCH BABUSHKINA ST. MOSCOW, 129344 RUSSIA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete ZHIDKOVA, LIDIA 38/1-2 MENZHINSKOGO ST. MOSCOW, 129281 RUSSIA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete GVINEPADZE, KAKHA 5000 N. OCEAN BLVD., #905 FORT LAUDERDALE FL 33308	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Balan, George 4900 N. Ocean Blvd # 1411 Ft. Lauderdale, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George* SIGNATURE REQUIRED
 DATE: 01/19/02 DAYTIME PHONE #: (954) 784-7909

CR2E034 (9/01)