

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000008260

**FILED**  
**Apr 02, 2014**  
**Secretary of State**  
**CC9162495720**

**Entity Name:** BULGARIAN EASTERN ORTHODOX CHURCH "SAINT NICHOLAS", INC.

**Current Principal Place of Business:**

2301 ADAMS ST  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

2130 MONROE ST  
HOLLYWOOD, FL 33020

**FEI Number: 45-3170443**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

KATCHOVA, AXENIA  
2130 MONROE ST  
HOLLYWOOD, FL 33020 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           PRESIDENT  
Name           IVAILO ZAHARIEV ZAHARIEV  
Address       1324 NE 181 ST  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title           VP  
Name           MATEEV, DIMITAR  
Address       2321 LEE ST  
City-State-Zip: HOLLYWOOD FL 33020

Title           TREASURER  
Name           KATCHOVA, AXENIA  
Address       2130 MONROE ST  
City-State-Zip: HOLLYWOOD FL 33020

Title           SECRETARY  
Name           DIMITROVA, SVETLA A  
Address       1939 JOHNSON ST  
City-State-Zip: HOLLYWOOD FL 33020

Title           DIRECTOR  
Name           MILKOVA, TANYA  
Address       253 172ND ST  
                  203  
City-State-Zip: SUNNY ISLES FL 33160

Title           DIRECTOR  
Name           KIROV, GEORGI I  
Address       8400 BYRON AVE #4B  
City-State-Zip: MIAMI BEACH FL 33141

Title           DIRECTOR  
Name           GALABOV, MARIO  
Address       116 SE 4TH ST  
                  31  
City-State-Zip: HALLANDALE FL 33009

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SVETLA DIMITROVA**

**SECRETARY**

**04/02/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date