

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A00000000238

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** ARTZIBUSHEV ENTERPRISES, LTD.

**Current Principal Place of Business:**

1525 W. HILLSBOROUGH  
TAMPA, FL 33603

**New Principal Place of Business:**

**Current Mailing Address:**

16559 HUTCHINSON ROAD  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 59-3629234

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARTZIBUSHEV, CONSTANTIN  
16559 HUTCHINSON ROAD  
ODESSA, FL 33556 US

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

MAMONTOFF, NADINE  
61610 FITZGERALD RD  
ODESSA, FL 33556 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: NADINE MAMONTOFF

04/28/2011

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: ARTZIBUSHEV, CONSTANTIN  
Address: 16559 HUTCHINSON ROAD  
City-St-Zip: ODESSA, FL 33556

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: ARTZIBUSHEV, DIMITRI  
Address: 16555 HUTCHINSON RD  
City-St-Zip: ODESSA, FL 33556

Address:  
City-St-Zip:

Document #:

Name: MAMONTOFF, NADINE A  
Address: 6160 FITZGERALD ROAD  
City-St-Zip: ODESSA, FL 33556

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: NADINE A. MAMONTOFF

GP

04/28/2011

Electronic Signature of Signing General Partner

Date