

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90405 047 ***150.00

DOCUMENT # F96000004263

1. Entity Name
NIENSCHANZ INTERNATIONAL, INCORPORATED



Principal Place of Business
**35 CORPORATE DRIVE
SUITE 1155
TRUMBULL, CT 06611**

Mailing Address
**35 CORPORATE DRIVE
SUITE 1155
TRUMBULL, CT 06611**

40058731



2. Principal Place of Business
TWO CORPORATE DRIVE

3. Mailing Address
TWO CORPORATE DRIVE

Suite, Apt. #, etc. **SUITE 234**

Suite, Apt. #, etc. **SUITE 234**

04192006 Chg-P CR2E034 (11/05)

City & State
SHELTON, CT

City & State
SHELTON, CT

4. FEI Number
59-3392601

Applied For
Not Applicable

Zip
06484

Country
USA

Zip
06484

Country
USA

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

6. Name and Address of Current Registered Agent

**JACOBS, PHYLLIS
GLOBAL CORPORATE SERVICES, INC
6698 NW 81 COURT
PARKLAND, FL 33067**

ADDRESS

CHANGE ONLY FOR

REGISTERED

AGENT

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
7920 ROYAL LACE TERRACE

City **LAKE WORTH**

FL

Zip Code
33467

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **CD** ☐ Delete
NAME **YARUTOV, VIKTOR**
STREET ADDRESS **VOROSHILOVA STREET 2**
CITY-ST-ZIP **ST PETERSBURG, RU 195213**

TITLE **P** ☐ Delete
NAME **GREENBERG, RACHEL**
STREET ADDRESS **35 CORPORATE DRIVE, SUITE 1155**
CITY-ST-ZIP **TRUMBULL, CT 06611**

TITLE **D** ☐ Delete
NAME **TRILESNYK, EUGENIE**
STREET ADDRESS **VOROSHILOVA STREET 2**
CITY-ST-ZIP **ST PETERSBURG, RU 195213**

TITLE **D** ☐ Delete
NAME **MOGULEVICH, NIKOLAI**
STREET ADDRESS **VOROSHILOVA ST. 2**
CITY-ST-ZIP **ST PETERSBURG, RU 195213**

TITLE **D** ☐ Delete
NAME **SEменов, ALEXANDRE**
STREET ADDRESS **VOROSHILOVA ST. 2**
CITY-ST-ZIP **ST PETERSBURG, RU 195213**

TITLE **D** ☐ Delete
NAME **MAKAROV, EGOR**
STREET ADDRESS **VOROSHILOVA ST. 2**
CITY-ST-ZIP **ST PETERSBURG, RU 195213**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **TWO CORPORATE DRIVE, SUITE 234**
CITY-ST-ZIP **SHELTON, CT 06484**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rachel Greenberg **RACHEL GREENBERG**

4-19-06 203-225-0200

Date Daytime Phone #