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Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90195 001 ***150.00

UP 1100

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G83310

1. Corporation Name
SSIP, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O SVETLANA FRIDMAN
11961 SW 20TH STREET
MIRAMAR FL 33025
US

Mailing Address
C/O SVETLANA FRIDMAN
11961 SW 20TH STREET
MIRAMAR FL 33025
US

3. Date Incorporated or Qualified
02/03/1984

2. Principal Place of Business
21 c/o Svetlana Fridman
Suite, Apt. #, etc.
22 11961 SW 20th Street

2a. Mailing Address
26 c/o SVETLANA FRIDMAN
Suite, Apt. #, etc.
27 11961 SW 20th Street

4. FEI Number
59-2623178
Applied For
Not Applicable

23 City & State
Miramar, FL.

28 City & State
Miramar, FL.

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

24 Zip 33025 25 Country US

29 Zip 33025 30 Country US

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRIDMAN, SVETLANA
121961 SW 20TH STREET
MIRAMAR FL 33025

81 Name
Fridman, Svetlana
82 Street Address (P.O. Box Number is Not Acceptable)
11961 SW 20th Street
83
84 City Miramar, FL 85 Zip Code 33025

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 607.0505, Florida Statutes.

SIGNATURE *Svetlana Fridman* Svetlana Fridman, PTD Registered Agent 1/12/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIDMAN, SVETLANA	1.2 NAME	
STREET ADDRESS	11961 SW 20TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	1.4 CITY-ST-ZIP	
TITLE	VPS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIDMAN, PEYSAKH	2.2 NAME	
STREET ADDRESS	11961 SW 20TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIDMAN, STANISLAV	3.2 NAME	
STREET ADDRESS	11961 SW 20TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIDMAN ILONA	4.2 NAME	
STREET ADDRESS	11961 SW 20TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Svetlana Fridman* Svetlana Fridman, Pres., 1/12/99 305-332-8981
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)