

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

04-17-2002 90183 001 *****5.00
 04-17-2002 90183 002 *****50.00

DOCUMENT # L01000005578
 1. Entity Name
ATV FINANCE GROUP LLC

Principal Place of Business Mailing Address
33 4TH STREET NORTH #205 **33 4TH STREET NORTH #205**
ST. PETERSBURG FL 33701 **ST. PETERSBURG FL 33701**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

4. Filing Number: **59-3713052**
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
LADYGIN, ANDREI
33 4TH STREET NORTH #205
ST. PETERSBURG FL 33701

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 City: _____ **FL** Zip Code: _____

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: *Andreï Ladygin*
Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

B. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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*PRESIDENT
 LADYGIN ANDREI
 33 4TH ST. NORTH #205 ST. PETERSBURG FL 33701*

CP25083 (9/01)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as Chapter 608, Florida Statutes.
 SIGNATURE: *Andreï Ladygin* **ANDREI LADYGIN** **727 798 7355**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date: **02.12.02** Daytime Phone # _____