

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 15, 2001 8:00 am**
Secretary of State

02-15-2001 90039 010 ***150.00

DOCUMENT # M36753

1. Entity Name

MOLDAVAN CO.

Principal Place of Business

Mailing Address

**C/O ANATOLY MOLDAVAN
231-174 ST
MIAMI BCH FL 33160
US****C/O ANATOLY MOLDAVAN
231-174 ST
MIAMI BCH FL 33160
US****00017441**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0014396**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOLDAVAN, EVELYN
231-174 ST. APT 1217
N. MIAMI BEACH FL 33160**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☐ Delete
NAME	MOLDAVAN, EVELYN	
STREET ADDRESS	231 174 ST S1217	
CITY-ST-ZIP	MIAMI BCH FL	

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

TITLE	DST	☐ Delete
NAME	MOLDAVAN, EVELYN	
STREET ADDRESS	231 174 ST S1217	
CITY-ST-ZIP	MIAMI BCH FL	

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

TITLE	D	☐ Delete
NAME	HOLDAVAN, ELIZABETH	
STREET ADDRESS	231-174 ST	
CITY-ST-ZIP	MIAMI BEACH FL 33160	

TITLE	Director	☒ Change ☐ Addition
NAME	MOLDOVAN, ELIZABETH	
STREET ADDRESS	231 174 St. #1217 Miami Beach, FL 33160	
CITY-ST-ZIP		

TITLE	D	☐ Delete
NAME	MOLDAVAS, ALEXANDER	
STREET ADDRESS	231-174 ST	
CITY-ST-ZIP	MIAMI BEACH FL 33160	

TITLE	Director	☒ Change ☐ Addition
NAME	MOLDOVAN, ALEXANDER	
STREET ADDRESS	231 174 St #1217 Miami Beach, FL 33160	
CITY-ST-ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with another line empowered.

SIGNATURE: **X Anatoly Moldavan**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)