## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUI	MENT # M91907								
1, Corporation	25TH STREET CORPORATI	•							
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;		•							
Principal Place	of Rusiness	Mailing Address				iisi i <b>sui dis</b> ii <b>s</b> ibik <b>t</b> i	VII VIIIII BI	B)I <b>4</b> 18() (86)	
12886 BISCAYNE BLVD. 12886 BISCAYNE BLVD.									
NORTH MIAMI		NORTH MIAMI FL 33181							
						TE IN THIS SPA	CE		
					3. Date Incorporated or Qualifed 07/25/1988				
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number			lied For	
21	·	26			65-0064667			Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$1	B.75 A	I	
City & State	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country		8. This corporation owes the curr			_,	
24	25 29 30		30]		Personal Property Tax.	<u> </u>		□No	
	9. Name and Address of Currer	nt Registered Agent	8	1 Name	10. Name and Address of New F	Registered Ager	ıτ		
Talalaevsky, valentina				Name	Same				
	6 BISCAYNE BLVD.		82	2 Street Addr	ess (P.O. Box Number is Not Accepta	able)			
NOR		8:	-						
,,,,,,			0	1					
			84	4 City		FL 85	Zip C	ode	
4d Burguent	to the provisions of Sections 607 050	12 and 607 1508 Florida Statute	s the above	ve-named com	oration submits this statement for the	numose of chan	aina its r	egistered	
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such channe was au'	thorized by	v the comoratio	on's board of directors. I hereby accep	ot the appointme	nt as reg	istered	
SIGNATURE			Silitation 4 Ac-			DATE		\	
12.				ent signature require	ADDITIONS/CHANGES TO OF		RECTO	RS IN 12	
TITLE	PSTD	☐ DELETE	13.	T T	7,00		Change	Addition	
NAME	TALALAEVSKY, VALENTINA	_	1.2 NAME						
STREET ADDRESS	12886 BISCAYNE BLVD.	·		ET ADDRESS				}	
CITY-ST-ZIP			1.4 CITY-	ST-ZIP					
TITLE			2.1 TITLE				Change	Addition	
NAME	2.2		2.2 NAME						
STREET ADDRESS	2:		2.3 STREE	ET ADORESS				1	
CITY-ST-ZIP			2. 4 CITY-	· ST- ZIP					
TITLE	☐ DELETE 3.1 T		3.1 TITLE				Change	☐ Addition	
NAME			3.2 NAMÉ	: [				{	
STREET ADDRESS			3.3 STRE	ET ADORESS				1	
CITY-ST-ZIP			3.4. CITY-	-ST-ZIP					
TITLE		☐ DELETE 4.11					Change	☐ Addition	
NAME			4. 2 NAME	<b></b>					
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP	,		4.4 CITY-				Observe		
TITLE		☐ DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NAME					}	
STREET ADDRESS	ļ.			ET ADDRESS	-				
CITY-ST-ZIP		□ BELETE	5.4 CITY- 6.1 TITLE				Change	Addition	
TITLE		☐ DELETE	O. I III CE	I		ĹJ'	Change	CT VAGINOU	

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90035 020 \*\*\*150.00