

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000004207

FILED
Dec 16, 2008
Secretary of State

Entity Name: RUSSIAN CENTER OF FLORIDA, INC.

Current Principal Place of Business:

18090 COLLINS AVE. #T-10
N MIAMI BEACH, FL 33160

New Principal Place of Business:

18090 COLLINS AVE. #T-10
MIAMI, FL 33160

Current Mailing Address:

18090 COLLINS AVE. #T-10
N MIAMI BEACH, FL 33160

New Mailing Address:

18090 COLLINS AVE. #T-10
MIAMI, FL 33160

FEI Number: 33-1008590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARKS, KIM CPA
11900 BISCAYNE BLVD. #290
N MIAMI, FL 33181 US

Name and Address of New Registered Agent:

MARKS, KIM CPA
2136 NE 123RD STREET
N MIAMI, FL 33181 US

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: KIM MARKS

12/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FELDMAN, ISAAC
Address: 18090 COLLINS AVE. SUITE T-10
City-St-Zip: MIAMI, FL 33160

Title: VD () Delete
Name: ELENA, KOVAL
Address: 18090 COLLINS AVE. SUITE T-10
City-St-Zip: MIAMI, FL 33160

Title: VS () Delete
Name: RACHEL, LEKHERZAK
Address: 18090 COLLINS AVE SUITE T-10
City-St-Zip: MIAMI, FL 33160

Title: TD () Delete
Name: MARK, LEKHERZAK
Address: 18090 COLLINS AVE SUITE T-10
City-St-Zip: MIAMI, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: LEON, BATKILIN
Address: 18090 COLLINS AVE. SUITE T-10
City-St-Zip: MIAMI, FL 33160

Title: VS (X) Change () Addition
Name: LARA, BATKILIN
Address: 18090 COLLINS AVE SUITE T-10
City-St-Zip: MIAMI, FL 33160

Title: TD (X) Change () Addition
Name: STEVE, LEYKIND
Address: 18090 COLLINS AVE SUITE T-10
City-St-Zip: MIAMI, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISAAC FELDMAN

PD

12/16/2008

Electronic Signature of Signing Officer or Director

Date