FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthant

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # N9400001836 (5)

RUSSIAN TRADE COUNCIL OF FLORIDA, INC.

Principal Place of Business Mailing Address 6242 6TH AVE S 6242 6TH AVE S 3. Date Incorporated or Qualified ST PETERSBURG FL 33707 ST PETERSBURG FL 33707 04/11/1994 4. FEI Number Applied For 59-3227853 Not Applicable 2s. Mailing Address 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? **12**1 № 23 28 Yes 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Žiρ Country Country Zip 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LOCHOW, ALEXANDER Street Address (P.O. Box Number is Not Acceptable) 6242 6TH AVENUE SOUTH ST. PETERSBURG FL 33707 83 City Zip Code 11. Pursuant to the provisions of Sections 617.0902 and 617.1508, 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 familia with, and accept the obligations of, Section 617.0503, Florida Statutes. **SIGNATURE** ed agent and litte if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition PD DELETE TITLE 1.1 TITLE LOCHOW, ALEXANDER 1.2 NAME NAME 6242 6TH AVE. SOUTH 1.3 STREET ADDRESS STREET ADDRESS **\$T. PETERSBURG FL 33707** CITY-ST-ZIP 1.4 CITY-ST-ZIP **DELETÉ** Change Addition 2.1 TIFLE VP (TITLE ALBNEY DANILOU, ALEX-2.2 NAME KOLESNICHENKO 6242 671 AVES. St. PEVE, FL 33707 12465 2ND STREET EAST #B105 STREET ADDRESS 2.3 STREET ADDRESS TREASURE ISLAND FL 33706 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition ALEXANDER Change VD 3.1 TITLE TITLE **POLYARUSH, NATASHA** 3.2 NAME NAME GONTCHAPOV 4559 33 AVE. NORTH 3.3 STREET ADDRESS STREET ADDRESS SAME **ST. PETERSBURG FL 33713** 3.4. CITY-ST-ZIP CITY-ST-ZIP

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 supplimental 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 tystee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

CIGNATURE:

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NAME

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Jun 03 1998 8:00am

Secretary of State