FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

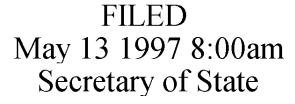
DOCUMENT # N9500003204 (3)

FIRST RUSSIAN BAPTIST CHURCH OF MIAMI BEACH, FLO RIDA, INC.

Principal	Place c	f Business	 3

Mailing Address

POST OFFICE BOX 600238 NO. MIAMI BEACH FL 33160 POST OFFICE BOX 600238 NO. MIAMI BEACH FL 33160-0238





NO. MIAMI BEACH FL 33160		NO. MIAMI BEACH FL 33160-0238							
						 Date Incorporated or Qualifie 07/07/1995 	d 3a. Da	te of Last R 05/19/19	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number			plied For
21		26			65-0666652		XIN	t Applicable	
Suite, Apl. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22			27				Fee Re	·	
City & State		City & State		6. Election Campaign Financing		\$ 5.00			
23	T 0	28	1 6			Trust Fund Contribution		Added	
Zip	Country	Zıp	h1	Country		8. This corporation has liability f		_	. 199.032,
24	25 9. Name and Address of Currer	29 nt Registered Agent	30]			Florida Statutes 10. Name and Address of New		No	
8. Name and Address of Current Registered Agent					Name	10. (100)10 0100 7100(000 07 100)		- Solv	
DOVEO	IVANI DEV								
BOYKO, IVAN REV 17560 ATLANTIC BLVD STE 317			62	Street A	ddress (P.O. Box Number is Not Accep	table)			
	MI BEACH FL 33160			83					
NO. MIAI	MI DEAUN PL 33 100								
				84	City		FL	85 Zip	Code
11. Pursuant t	to the provisions of Sections 617.050)2 and 617.1508. Florida Statu	tes, the	e above	named	corporation submits this statement for th	n nurnann of	changing it	s repistered
11. Pursuant to the provisions of Sections 617.0502 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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE _	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AN	ID DIRECTORS	1	3.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12
TITLE	D	☐ DELETE	1.	.1 TITLE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		☐ Change	☐ Addition
NAME	BOYKO, IVAN REV		1.2	2 NAME	•				
STREET ADDRESS				3 STREET A	ADDRESS				
CITY-ST-ZIP	NO. MIAMI BEACH FL 33160		1/	4 CITY-ST	- ZIP				
THLE	D	DELETE	2.	.1 TITLE	1			Change	Addition
NAME	ZAITSEVA, IRINA		2.	2 NAME					
STREET ADDRESS	7930 EAST DRIVE STE 102		2.	3 STREET A	ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33141		2.	4 CITY-\$1	[- ZIP	•			
TITLE	D	DELETE	3.	. I TITLE		D		Change :	Addition
NAME	BUSCH, LEE A		3:	2 NAME		DOURD VEVERN	Ч		
STREET ADDRESS	11630 SW 97TH STREET		3:	3 STREET A	ADDRESS	BOYNO, 3E-1	ر استوم	11000	
CITY-S1-ZIP	MIAMI FL 33176		3.	4. CITY-ST	r-ZIP	801 THREE ISLAND	12 13 140	# シレん	
TITLE		☐ DELETE	4	1 TITLE		BOYKO, YEVGEN BOITHREE ISLAND HALLANDHLE, FO	_ 23009	Change	Addition
NAME			4.	2 NAME		•			
STREET ADDRESS			4:	3 STREET A	ADDRESS				
CITY-ST-ZIP			4.	4 CITY-ST	-ZIP				
TITLE		☐ DELETE	5	1 TITLE				Change	Addition
NAME			5	2 NAME					
STREET ADDRESS			5	3 STREET A	ADDRESS				
CITY-ST-ZIP			5	4 CITY-ST	-ZIP				·
THTLE		DELETE	_	1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			6.	2 NAME					
STREET ADDRESS			6.	3 STREET A	uddress !				
CHTY-ST-ZIP			1	4 City-St					
	ov certify that the information supplie	d with this filing does not qual				sted in Section 119.07(3)(i). Florida Statu	ites I further	certify that	the

4. I do hereby certify that the information supplied with this filling does not quality 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/97

305-931-8972

Daytime Phone # aga 4444