

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 24, 2002 8:00 am**  
**Secretary of State**

03-24-2002 90015 029 \*\*\*\*61.25

**DOCUMENT # N95000003204**

1. Entity Name

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

Principal Place of Business

Mailing Address

**501 96 STREET BAL HARBOR  
 MIAMI BEACH FL 33154**

**POST OFFICE BOX 600238  
 NO. MIAMI BEACH FL 33160**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0666652**

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

**BOYKO, IVAN REV  
 251 174TH ST  
 STE 2007  
 NO. 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

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
 NAME **BOYKO, IVAN REV**  
 STREET ADDRESS **17560 ATLANTIC BLVD. STE 317**  
 CITY-ST-ZIP **NO. MIAMI BEACH FL 33160**

TITLE ☒ Change ☐ Addition  
 NAME **251-174th Street # 2007**  
 STREET ADDRESS **Sunny Isles Beach, FL 33160**  
 CITY-ST-ZIP

TITLE **D** ☒ Delete  
 NAME **FEDIAKOVA, NADEJDA**  
 STREET ADDRESS **2000 ATLANTIC S. #114**  
 CITY-ST-ZIP **HALLANDALE FL 33009**

TITLE ☒ Change ☐ Addition  
 NAME **NINEL RUSSINA**  
 STREET ADDRESS **700 NE 4 Ct #4**  
 CITY-ST-ZIP **HALLANDALE FL 33009**

TITLE **D** ☐ Delete  
 NAME **BOYRO, YEVGENY**  
 STREET ADDRESS **801 THREE ISLANDS BLVD #302**  
 CITY-ST-ZIP **HALLANDALE FL**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

**3/6/02 1305 931-8972**

CR2E037 (9/01)