

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003365 (2)

1. Corporation Name

AMERICAN AND FORMER SOVIET UNION CHAMBER OF COMMERCE, INC.



Principal Place of Business

3751 MAGUIRE BLVD. STE 150
ORLANDO FL 32803

Mailing Address

3751 MAGUIRE BLVD. STE 150
ORLANDO FL 32803

3. Date Incorporated or Qualified
07/17/1995

3a. Date of Last Report
NONE

2. Principal Place of Business

21 SAME

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

JOHNSON, WILLIAM E ESQ. I
1210 CAMPBELL STREET
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name NONE - NO CHANGES

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

WILLIAM E. JOHNSON

20 JUNE 1996

DATE

12. OFFICERS AND DIRECTORS

TITLE * PRESIDENT A, C
NAME LEONID KIMLAT
STREET ADDRESS 201 MONROE AVE #53
CITY-ST-ZIP MAITLAND FLORIDA 32751

TITLE VICE PRESIDENT
NAME WILLIAM E. JOHNSON
STREET ADDRESS 1210 CAMPBELL ST
CITY-ST-ZIP ORLANDO FLORIDA 32806

TITLE SECRETARY-TREASURER
NAME MAYYA KIMLAT
STREET ADDRESS 201 MONROE AVE #53
CITY-ST-ZIP MAITLAND FLORIDA 32751

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

L. Kimlat, President

Date

Daytime Phone #

20 JUNE 96 407-644 5723

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