2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N9700006040 - P-

1. Entity Name

RUSSIAN UKRAINIAN BAPTIST CHURCH, INC.



FILED Feb 14, 2008 08:00 AM Secretary of State

Principal Place of Business

1701 MONROE STREET HOLLYWOOD, FL 33020 Mailing Address

1601 S OCEAN DR APT 506

HOLLYWOOD, FL 33019



02122008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0881878

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MUDRYK, STEFAN 1601 S OCEAN DRIVE **APT 506** HOLLYWOOD, FL 33019

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the obligations of registered agent.	the purpose of c	changing its registered office of	or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept	_
Signature, typed or printed name of registered agent at	d title if applicable.	(NOTE: Registered Agent sign:	ature required when reinstating)	DATE	
Filing Foo is \$61.25	9. Flect	tion Campaign Financing	\$5 00 May Po		_

Due by May 1, 2008

Trust Fund Contribution.

Added to Fees

10. OFFICERS AND DIRECTORS TITLE TS NAME SERDIUK, ANNA STREET ADDRESS 231-174 STREET, APT 1005 CITY-ST-7IP N MIAMI BEACH, FL 33168 TITLE NAME REDKIN, ELENA STREET ADDRESS 5010 NOB HILL ROAD, APT 334 CITY+ST-7IP SUNRISE, FL 33351 TITLE NAME CHARTSCHLAA, PLATON STREET ADDRESS 1163 HAYES STREET CITY-ST-ZIP HOLLYWOOD, FL 33019 TITLE NAME MUDRYK, STEFAN STREET ADDRESS 1601 S OCEAN DR #506 CITY-ST-ZIP HOLLYWOOD, FL 33019 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILLE . NAME STREET ADDRESS CITY-ST-ZIP

U00000827376 02/21/08-80088-022 61.25

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

NTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-03.

Daytime Phone #

954- 995-2496