

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90324 047 ****61.25

DOCUMENT # N99000002562

1. Entity Name

**CENTER FOR RUSSIAN-AMERICAN BEHAVIORAL
STUDIES INC.**



Principal Place of Business

912 SE 11 CT
FT. LAUDERDALE FL 33301

Mailing Address

912 SE 11 CT
FT. LAUDERDALE FL 33301

2. Principal Place of Business

1635 NE 4th PLACE

3. Mailing Address

1635 NE 4th PLACE

Suite, Apt. #, etc.

SUITE 4

Suite, Apt. #, etc.

SUITE 4

City & State

FT. LAUDERDALE, FLORIDA

City & State

FT. LAUDERDALE, FLORIDA

Zip

33301

Country

USA

Zip

33301

Country

USA

1st MOORE

CR2E037 (10/04)

4. FEI Number

65-0905762

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OPTEKAR, DAVID
912 SE 11 CT
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name **OPTEKAR, DAVID**

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

1635 NE 4th PLACE - SUITE 4

FT. LAUDERDALE

FL

Zip Code
33301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David Optekar **DAVID OPTEKAR - PRESIDENT**

4/20/05

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
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	OPTEKAR, DAVID	
STREET ADDRESS	912 SE 11 CT	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	
TITLE	D	<input type="checkbox"/> Delete
NAME	WATSON, DONNA	
STREET ADDRESS	2655 E OAKLAND PARK BLVD.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33306	
TITLE	D	<input type="checkbox"/> Delete
NAME	O'CONNOR, MAUREEN	
STREET ADDRESS	4601 POINCIANA STREET #2	
CITY-ST-ZIP	LAUDERDALE BY THE SEA FL 33308	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZINOVIEVA, NATALIA	
STREET ADDRESS	UL.VOSKOVA, 22-10	
CITY-ST-ZIP	ST. PETERSBURG, RUSSIA	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHABALINA, VALENTINA	
STREET ADDRESS	PETERSBURGSKOYE SHOSSE, 13/1-230	
CITY-ST-ZIP	ST. PETERSBURG, PUSHKIN	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *David Optekar* **DAVID OPTEKAR - PRESIDENT** **4/20/05** **(954) 766-8881**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #