2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002562

FILED Mar 10, 2008 Secretary of State

Entity Name: CENTER FOR RUSSIAN-AMERICAN BEHAVIORAL STUDIES INC.

Current Principal Place of Business: New Principal Place of Business: 417 N.E. 17TH AVENUE- APT 2 840 W. DANIA BEACH BLVD FT. LAUDERDALE, FL 33301 SUITE 1 DANIA BEACH, FL 33004 **Current Mailing Address: New Mailing Address:** 417 N.E. 17TH AVENUE- APT. 2 840 W. DANIA BEACH BLVD FT. LAUDERDALE, FL 33301 SUITE 1 DANIA BEACH, FL 33004 FEI Number: 65-0905762 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: OPTEKAR, DAVID OPTEKAR, DAVID 417 N.E 17TH AVE- APT. 2 840 W. DANIA BEACH BLVD FT. LAUDERDALE, FL 33301 US DANIA BEACH BLVD, FL 33004 US 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: 03/10/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DPC () Delete (X) Change () Addition OPTEKAR, DAVID OPTEKAR, DAVID Name: Name: 417 N.E. 17TH AVE- APT 2 Address: 840 W. DANIA BEACH BLVD-APT 13 Address: City-St-Zip: FT. LAUDERDALE, FL 33301 City-St-Zip: DANIA BEACH,, FL 33004 Title: Title: () Delete () Change () Addition Name: COTE, DIANE Name: Address: 4715 MAITLAND DR Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: Title: () Delete Title: () Change () Addition ZINOVIEVA, NATALIA PHD. Name: Name: U1. VOSKOVA, 22-10 Address: Address: City-St-Zip: ST PETERSBURG RUSSIA. 197101 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SHABALINA, VALENTINA Name: Address: PETERSBURGSKOYE SHOSSE, 13/1-230 Address: City-St-Zip: ST. PETERSBURG, PUSHKIN, City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID OPTEKAR PRES 03/10/2008