2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002562

FILED Mar 22, 2009 Secretary of State

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

Current Principal Place of Business:			New Principal Place of Business:	
	NIA BEACH BI	_VD		
SUITE 1 DANIA BE	ACH, FL 3300	4		
Current Mailing Address:			New Mailing Address:	
340 W DA	ANIA BEACH BI	VD		
SUITE 1	ACH, FL 3300			
	·		EEI Number Net Applicable ()	Contificate of Status Desired ()
-EI Number	: 65-0905762	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
APT 1	R, DAVID ANIA BEACH BI ACH BLVD, FL			
	,		ournose of changing its register	red office or registered agent, or both,
The above n the State	e named entity s e of Florida.	abilits this statement for the p	dipose of changing its register	G G , ,
n the Stat	e of Florida.	ubilitis tills statement for the p	narpose of changing its register	
n the Stat	e of Florida.	ic Signature of Registered Age		Date
n the State	e of Florida.	ic Signature of Registered Age	ent	
n the State	e of Florida. RE: Electron S AND DIRECTOPC () OPTEKAR, DAV	ic Signature of Registered Age	ent	Date
n the State SIGNATUI DFFICER Title: Name: Address:	e of Florida. RE: Electron S AND DIREC DPC () OPTEKAR, DAV 840 W. DANIA E DANIA BEACH,	ic Signature of Registered Age FORS: Delete ID BEACH BLVD-APT 13 FL 33004 Delete	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
n the State BIGNATUI DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron S AND DIREC* DPC () OPTEKAR, DAV 840 W. DANIA E DANIA BEACH,, D () COTE, DIANE 4715 MAITLANE TAMARAC, FL: D () ZINOVIEVA, NA' U1. VOSKOVA,	ic Signature of Registered Age FORS: Delete ID BEACH BLVD-APT 13 FL 33004 Delete D DR 33319 Delete FALIA PHD.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition

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 DPC	03/22/2009
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