

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91237 005 ***150.00

DOCUMENT # P00000026636

1. Entity Name

THE RUSSIAN YELLOW PAGES, INC.

Principal Place of Business

**3901 SOUTH OCEAN DRIVE
 SUITE 85
 HOLLYWOOD FL 33019**

Mailing Address

**POST OFFICE BOX 1552
 HALLANDALE FL 33008**

2. Principal Place of Business

16300 NE 19 AV # 104

3. Mailing Address

P.O. Box # 1552

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

N. Miami, Beh

City & State

HALLANDALE FL

4. FEI Number

65-0992493

Applied For

☐ Not Applicable

Zip

33162

Country

Zip

33008

Country

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name **Days Holding Inc / Lugovtsova**

Street Address (P.O. Box Number is Not Acceptable)
16300 NE 19 AV # 104

City **N. Miami, Beh**

FL

Zip Code **33162**

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.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

03/14/01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	SLOBODENYUK, YURY	
STREET ADDRESS	3901 SOUTH OCEAN DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	KHLIUSTOV, SERQUEI	
STREET ADDRESS	3901 SOUTH OCEAN DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	S	<input type="checkbox"/> Delete
NAME	LUGOVTSOVA, YULIA	
STREET ADDRESS	3901 SOUTH OCEAN DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OLGA PEDERSEN
STREET ADDRESS	16300 NE 19 AV # 104
CITY-ST-ZIP	N. Miami, Beh 33162
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TDP
STREET ADDRESS	KHLIUSTOV SERQUEI
CITY-ST-ZIP	16300 NE 19 AV # 104
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PSV
STREET ADDRESS	LUGOVTSOVA YULIA
CITY-ST-ZIP	16300 NE 19 AV # 104
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARINA RASMUSEN
STREET ADDRESS	16300 NE 19 AV # 104
CITY-ST-ZIP	N. Miami, Beh 33162
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VORONAYA YULIA
STREET ADDRESS	16300 NE 19 AV # 104
CITY-ST-ZIP	N. Miami, Beh FL 33162
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALEX KHOREV
STREET ADDRESS	16300 NE 19 AV # 104
CITY-ST-ZIP	N. Miami, Beh FL 33162

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **President Lugovtsova Y.** **03/14/01** **305-9451142**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)