2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State
05-23-2001 91156 039 ***150.00

DOCUMENT # P00000080158

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DO NOT WRITE IN THIS SPACE

1. Entity Name
Y.L.I SERVICES INC

Principal Place of Business	Mailing Address
2525 N. STATE RD 7 #115 HOLLYWOOD, FL 33021	2525 N. STATE RD 7 #115 HOLLYWOOD, FL 33021

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	2525 N. STATE RD 7 #115 Suite, Apt. #, etc. 115
City & State	City & State HOLLYWOOD FL
Zip / Country	Zip 33021 / Country BROWARD

4. FEI Number 65-1035020 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
YAN OLEYEK 21691 SW STATE RD 7 BOCA RATON, FL 33428	Name YAN OLEYEK Street Address (P.O. Box Number is Not Acceptable) 2525 N. STATE RD 7 #115 City HOLLYWOOD FL Zip Code 33021

. 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] 5/1/2001
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

. 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
LE AME REET ADDRESS Y-ST-ZIP	PD YAN OLEYEK 2525 N STATE RD 7 #115 HOLLYWOOD, FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
LE ME REET ADDRESS Y-ST-ZIP	VPD IGOR OLEYEK 2525 N. STATE RD 7 #115 HOLLYWOOD, FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
E ME EET ADDRESS -ST-ZIP	S LEV OLEYEK 2525 N. STATE RD 7 #115 HOLLYWOOD, FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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E ET ADDRESS -ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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] YAN OLEYEK PD 5/1/2001