

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90056 042 ***150.00

DOCUMENT # P00000102643

1. Entity Name *V.O. International Corp.*

DO NOT WRITE IN THIS SPACE

653358

2. Principal Place of Business
2215 SW 47 St

3. Mailing Address
2215 SW 47 St

Suite, Apt. #, etc.
#2

Suite, Apt. #, etc.
#2

DO NOT WRITE IN THIS SPACE

City & State
Port Lauderdale FL

City & State
Port Lauderdale FL

4. FEI Number *65-1052328*

Applied For
Not Applicable

Zip Country
33312 USA

Zip Country
33312 USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City *FL* Zip Code

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

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

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 *P. Sergey Golubev, President*
NAME
STREET ADDRESS
CITY-ST-ZIP
*2215 SW 47 St #2
Port Lauderdale
FL 33312*

TITLE *Vice-President*
NAME
STREET ADDRESS
CITY-ST-ZIP
*Julia Golubeva
2215 SW 47 St #2
Port Lauderdale FL 33312*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Sergey Golubev
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/02 (954) 655-02-02
Date Daytime Phone #

CR2E034B (12/01)