

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
 05-19-2002 90190 035 ***158.75

027015 AV

DOCUMENT # P01000104433

1. Entity Name

GENERAL RESEARCH GROUP CORPORATION

Principal Place of Business

**1900 GLADES ROAD SUITE 280
 BOCA RATON FL 33431**

Mailing Address

**1900 GLADES ROAD SUITE 280
 BOCA RATON FL 33431**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1153692

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

GURIN, SERGEY V

**1900 GLADES ROAD SUITE 280
 BOCA RATON FL 33431**

Name **Sergey Gurin**

Street Address (R.F. Box Number is Not Acceptable)

Suite 280

1900 Glades Road

City

Boca Raton

FL

Zip Code

33431

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

4-25-02

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

TITLE **D** ☐ Delete
 NAME **MUKHAMEDZANOV, TIMUR**
 STREET ADDRESS **20200 NE 27TH COURT APT J30**
 CITY-ST-ZIP **AVENTURA FL 33180**

TITLE **D** ☒ Delete
 NAME **GURIN, SERGEY**
 STREET ADDRESS **1900 GLADES ROAD SUITE 280**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☒ Delete
 NAME **KOZLOV, SERGEY**
 STREET ADDRESS **8/3 TILTO STREET APT 5**
 CITY-ST-ZIP **VILNIUS LT-2000 LITHAUANIA**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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TITLE ☐ Change ☐ Addition

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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Mukhamedzanov

Jan 10, 2002 (561)3610581
 Date Daytime Phone #

CR2E034 (9/01)