2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2008 08:00 AM Secretary of State

ANNUAL REPORT					Apr 28, 2008 08:0		
DOCUMENT # P03000042229 1. Entity Name RUSSIAN HOUSE, INC.						Secretary of St	
Principal Plac 822 E NEW I MELBOURNE	HAVEN	Meiling Address 822 E NEW HAVEN MELBOURNE, FL 32901					
DO NOT WRITE IN THIS SPA			CE	02062008 4. FEI Numb	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEMBETOVA, NATALIE 822 E NEW HAVEN MELBOURNE, FL 32901					NOT W THIS SP		
8. The above the obligat	named entity submits this statement for the ions of registered agent.	e purpose of changing its register	red office or rega	stered agent, or bo	oth, in the State of Flo	rida. I am familiar with, and accept	
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 NOTE Registere (NOTE Registere 9. Election Campaign Finar Trust Fund Contribution			1	55.00 May Be		DATE	
10. IITLE NAME SIREEI ADDRESS CITY-SI-ZIP IITLE NAME SIREEI ADDRESS CITY-SI-ZIP IITLE NAME SIREEI ADDRESS SIRLEI ADDRESS SIRLEI ADDRESS	OFFICERS AND DID D BEMBETOVA, NATALIE 822 E NEW HAVEN MELBOURNE, FL 32901 VP VARLAMOV, EDOUARD 822 E NEW HAVEN MELBOURNE, FL 32901	RECTORS	-	DO	05/21/08-	0927899 -80007-010 150.00 RITE	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			-		THIS SP		

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/08 321-733-5928