2005 FOR PROFIT CORPORATION

Apr 21, 2005 8:00 am Secretary of State ANNUAL REPORT 04-21-2005 90239 040 ***158.75 **DOCUMENT # P03000124032** COLISEUM LEATHER GALLERY, INC. Principal Place of Business Mailing Address 7006 S. TAMIAMI TRAIL 7006 S. TAMIAMI TRAIL SARASOTA, FL 34231 SARASOTA, FL 34231 2. Principal Place of Business 3. Mailing Address - Suite; Apt. #, etc. Suite, Apt. #, etc." 04142005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 55-0850793 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u>Benderskiy, Igor</u> KHASIK, DMITRIY Street Address (P.O. Box Number is Not Acceptable) 5640 FOUNTAIN LAKE CIRCLE APT, 203 5757 Summerside BRADENTON, FL 34207 Lane Sarasota 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing. \$5.00 May Be FILE NOW!!! FEE IS \$150:00~ Added to Fees Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ΡD ☐ Addition TITLE Delete TITLE Change BENDERSKIY, IGOR NAME NAME STREET ADDRESS 5757 SUMMERSIDE LANE STREET ADDRESS CITY-ST-7IP SARASOTA, FL 34237 CITY-ST-ZIP TITLE PD TITLE ☐ Change Addition Delete NAME KHASIK, DMITRIY NAME 5640 FOUNTAIN LAKE CIRCLE, APT. 203 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIP Addition **Change** D ☐ Delete TITLE FITLE KRAKHMALNIKOV, GRIGORIY NAME Krakhmalnikov, Grigoriy NAME 5310 Colony Meadow STREET ADDRESS 5316 COLONY MEADOW LANE STREET ADDRESS SARASOTA, FL 34233 CITY-ST-ZIP CITY-ST-ZIP arasota ■ Addition ☐ Delete TITLE Change TiTI F NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZiP ---CITY-ST-ZIP. Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE · Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

CITY-ST-ZIP

SIGNATURE: _	Igor	Benderskin	4/17/05	(541) 927-0311
	SIGNATURE AND	TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #