

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000040966 (2)

1. Corporation Name

AMERICAN MERCHANDISING CORP.

Principal Place of Business

6242 6TH AVE. SOUTH
ST. PETERSBURG FL 33707

Mailing Address

6242 6TH AVE. SOUTH
ST. PETERSBURG FL 33707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/09/1993

4. FEI Number

59-3187127

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

LOCHOW, YVONNE-
6242 6TH AVENUE SOUTH
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent

81 Name LOCHOW, ALEXANDER

82 Street Address (P.O. Box Number is Not Acceptable)

83 6242 6TH AVENUE SOUTH

84 City ST. PETERSBURG

FL

85 Zip Code 33707

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation has submitted this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, last name, first name, and title of registered agent and title of applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME LOCHOW, ALEXANDER
STREET ADDRESS 6242 6TH AVE. SOUTH
CITY-ST-ZIP ST. PETERSBURG FL 33707

☒ DELETE

TITLE VD
NAME LOCHOW, YVONNE
STREET ADDRESS 6242 6TH AVE. SOUTH
CITY-ST-ZIP ST. PETERSBURG FL 33707

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE PD GONTCHAROV,
1.2 NAME YURY
1.3 STREET ADDRESS 6242 6TH AVE S. ST. PETE, FL 33707
1.4 CITY-ST-ZIP

2.1 TITLE VD ALEXA LOCHOW,
2.2 NAME ALEXANDER
2.3 STREET ADDRESS SAME
2.4 CITY-ST-ZIP

3.1 TITLE VD KOLESENTCHENKO,
3.2 NAME ALEXEY
3.3 STREET ADDRESS SAME
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

600002541206
-05/29/98--01095--027
***150.00

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an annual report with an address.

SIGNATURE:

[Signature]

YURY GONTCHAROV 03/20/98 813 415-0606

CR2E034 (10/97)