

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

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90330 022 ***150.00

DOCUMENT # P93000067106

1. Entity Name

RUSSIAN AND TURKISH BATH, INC.

DO NOT WRITE IN THIS SPACE

B0053829

2. Principal Place of Business 5445 COLLINS AVE		3. Mailing Address 5445 COLLINS AVE		4. FEI Number 65-0438787		Applied For Not Applicable	
Suite, Apt. #, etc. PAV-5		Suite, Apt. #, etc. 8AV 5		DO NOT WRITE IN THIS SPACE			
City & State MIAMI BEACH FL		City & State MIAMI BEACH FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Zip 33140	Country USA	Zip 33140	Country USA				

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name	LOUIS D ZARETSKY		
Street Address (P.O. Box Number is Not Acceptable)	555 NE 15 ST H 100		
City	MIAMI	FL	Zip Code 33132

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 _____ (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) <input type="checkbox"/>	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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. BOBIS TUBERMAN 5445 COLLINS AVE PAV-5 MIAMI BEACH FL 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LUDMILLA TUBERMAN 5445 COLLINS AVE PAV-5 MIAMI BEACH FL 33140	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)(f), 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  DATE 03/28/02 305 8655409