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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000071451

1. Corporation Name

CHILLIVANI & BADVCHNIKOV INC

SULLIVA	N & BAKTSTINIKUV, INC.							
Principal Place	e of Business	Mailing Address						
2075 WEST FIR	IST STREET	2075 WEST FIRST STREET						
#204 #204				DO NOT WRITE IN THIS SPACE				
FT. MYERS FL 33901 FT. MYERS FL 33901								
US		US			3. Date Incorporated or Qualifed			
					10/14/1993	т	1 4	
2. Principal P	Principal Place of Business 2a. Mailing Address				4. FEI Number			ied For
21		26			65-0453086			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>-</b>	. <b>75</b> Ad ee Regi	
22		27					<u>-</u>	
City & Stat		City & State			6. Election Campaign Financing		.00 M	
23		28			Trust Fund Contribution		ided to	rees
Zip	Country	Zip	Country	,	8. This corporation owes the current year	Intangible		⊒No
24	25	29 30	0		Personal Property Tax.		S L	1100
	9. Name and Address of Currer	nt Registered Agent		1	10. Name and Address of New Register	3a Agent		
BUCKINGHAM, KENLEIGH			81	Name	Address (D.O. Day Murphas is blat Associable)			
2075 W FIRST ST SUITE 160			82	Street Add	ress (P.O. Box Number is Not Acceptable)			
#204	4		83					
FT. I	MYERS FL 33901							
			84	City		85	Zip Co	xde
Office OF F	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obligations of the state	of Florida, Such change was autrations of, Section 607.0505, Florid	norized by a Statutes	the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changi pointment	ng its re as regi	egistered stered
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS	AND DIR	ECTOR	S IN 12
TITLE	DVP	☐ DELETE	1.1 TITLE			Ch	ange	Addition
NAME .	BARYSHNIKOV, MIKHAIL		1.2 NAME					
STREET ADDRESS	2075 W 1ST STREET #204		13 STREE	TADORESS				
CITY-ST-ZIP	FT MYERS FL		1.4 CITY-S					
TITLE	DS	☐ DELETE	2.1 TITLE	,		☐ Ch	ange	☐ Addition
NAME	STRAYHORN, E BRUCE	_	2.2 NAME					
	2075 W 1ST STREET #204			T ADDRESS				
STREET ADDRESS	FT MYERS FL			1	• •			
CITY-ST-ZIP		□ DELETE	2.4 CITY-S 3.1 TITLE	51-211		Ch	ange	Addition
TITLE	OT ANATHAN						-	_
NAME	STOUT, J NATHAN		3.2 NAME					
STREET ADDRESS	2075 W 1ST STREET #204		I	T ADDRESS				
CITY-ST-ZIP	FT MYERS FL		3.4. CITY-5	ST-ZIP			nnna-	T Addition
TITLE	DP	☐ DELETE	4.1 TITLE			Ch	iange	☐ Addition
NAME	SULLIVAN, HAYWOOD		4. 2 NAME	1				
STREET ADDRESS	2075 W 1ST STREET #204		4.3 STREE	T ADDRESS		•		

CITY-ST-ZIP 14. Thereby 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 in an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

☐ DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

FT MYERS FL

Change

Change

☐ Addition

Addition

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90135 041 \*\*\*158.75