FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 21 AM 10:29

DOCUMENT # **P94000005707 (2)**

1. Corporation Name
ABACUS HOLDINGS CORP.

Principal Place of Business	Mailing Address
1001 S BAYSHORE DR SUITE 2706 MIAMI FL 33131	1001 S BAYSHORE DR SUITE 2706 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/25/1994
3a. Date of Last Report:

2. Principal Place of Business (21): 714 West Dilido Drive
2a. Mailing Address (26):

4. FEI Number: 55-0463647 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State (23): Miami Beach, Florida
City & State (28):

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip (24): 33139 Country (25): U.S.A.
Zip (29): Country (30):

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FRIED, MARK E
2706 BRICKELL BAY OFFICE TOWER
1001 S BAYSHORE DR
MIAMI FL 33131

10. Name and Address of New Registered Agent

91 Name
92 Street Address (P.O. Box Number is Not Acceptable)
93
94 City FL 95 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when name changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	D/V/VS/VT	☒ Change ☐ Addition
NAME	MARKELOV, ALEXANDRE S	12 NAME	MARKELOV, ALEXANDRE S.	
STREET ADDRESS	MOSGORBYTMEBEL 10	13 STREET ADDRESS	MOSGORBYTMEBEL 10	
CITY-ST-ZIP	VISHNEVSKOGO, MOSCOW, RUSSIA	14 CITY-ST-ZIP	VISHNEVSKOGO, MOSCOW, RUSSIA	
TITLE	D	21 TITLE	D/P/S/T	☐ Change ☐ Addition
NAME	EFIMENKO, VALERI V	22 NAME	EFIMENKO, VALERI V.	
STREET ADDRESS	MOSGORBYTMEBEL 10	23 STREET ADDRESS	MOSGORBYTMEBEL 10	
CITY-ST-ZIP	VISHNEVSKOGO, MOSCOW, RUSSIA	24 CITY-ST-ZIP	VISHNEVSKOGO, MOSCOW, RUSSIA	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE: MARK E. FRIED 6/16/95 (305) 371-2079
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0130210 CP