

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 27 AM 7:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000031857 (3)

1. Corporation Name

AMUR INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

1445 ALTON RD
SUITE 102
MIAMI BEACH FL 33139

1445 ALTON RD
SUITE 102
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3b. Date of Last Report

04/27/1994

4. FET Number

65-0504603

Approved 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 has liability for intangible tax under S. 193 (1)(3)
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1445 Alton Rd

26 Suite, Apt. #, etc

22 Suite 102

27 City & State

23 Miami Beach, FL

28 Zip

Country

24 33139

25 USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARSKAYA, BETYA
7772 BISCAYNE BLVD
MIAMI FL 33138

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607 (2)(b) and 607 (1)(b), 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 (5)(b), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent Accepting Appointment)

(Signature of Registered Agent Accepting Appointment or Agent Accepting Appointment)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	P
2. STREET ADDRESS	DUDAREV, ANDREY V
3. CITY, ST, ZIP	VOKZALNAIA ULITS A P/O 13
	KOMSOMOLSK RUSSIA 681000
1. NAME	V
2. STREET ADDRESS	SELEZNEV, IGOR G
3. CITY, ST, ZIP	VOKZALNAIA ULITS A P/O 13
	KOMSOMOLSK RUSSIA 681000
1. NAME	ST
2. STREET ADDRESS	BARSKAYA, BETYA
3. CITY, ST, ZIP	7772 BISCAYNE BLVD
	MIAMI FL 33138
1. NAME	
2. STREET ADDRESS	
3. CITY, ST, ZIP	
1. NAME	
2. STREET ADDRESS	
3. CITY, ST, ZIP	
1. NAME	
2. STREET ADDRESS	
3. CITY, ST, ZIP	

1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		
1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		
1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		
1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		
1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		
1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193 (1)(b), Florida Statutes. I further certify that the information submitted 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. I am an officer or director of the corporation or the registered agent or broker 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 as an attachment with an address.

SIGNATURE: *Betya Barskaya* / BETYA BARSKAYA

04/14/95 (305) 531-0372