

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

CORPORATION
ANNUAL REPORT
1995



STATE DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
CORPORATION REPORT

APPROVED
AND
FILED

35 MAY 19 11:03:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000068177 (2)**

NORD GROUP, INC.

Principal Office Address: **C/O OSCAR LEVIN/GREENBERG, TRAURIG
1221 BRICKELL AVE., 23RD FLOOR
MIAMI FL 33131**

Mail Stop Address: **C/O OSCAR LEVIN/GREENBERG, TRAURIG
1221 BRICKELL AVE., 23RD FLOOR
MIAMI FL 33131**

DATE TO WRITE IN THIS SPACE

| | |
|---|---------------------------------------|
| 3. Date incorporated or organized 09/13/1994 | 3a. Date of last report |
| 4. FFL Number 65-0520029 | Approved Fee Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 6. This corporation has liability for intangible tax under S. 1927, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--|--|
| 2. Principal Office Address 21. 1221 Brickell Avenue | 2a. Mailing Address 26. Same |
| 22. Suite # 943 | 27. Suite Apt. # Job Same |
| 23. Miami, Florida | 28. City & State Same |
| 24. 33131 | 29. Zip Same |
| 25. USA | 30. Country Same |

| | |
|---|--|
| 9. Name and Address of Current Registered Agent LEVIN, OSCAR 1221 BRICKELL AVE. 23RD FLOOR MIAMI FL 33131 | 10. Name and Address of New Registered Agent 81. Name Serguei Novikov 82. Street Address (P.O. Box Number is Not Applicable) 1221 Brickell Avenue 83. Suite #943 84. City Miami, Florida 85. Zip Code FL 33131 |
|---|--|

11. The agent, the president of the corporation and each officer of the corporation, hereby accept the appointment as registered agent of the corporation in compliance with the provisions of Sections 602 and 607, Florida Statutes. The above named corporation submits the statement for the purpose of changing its registered office and registered agent in compliance with the provisions of Sections 602 and 607, Florida Statutes. I hereby accept the appointment as registered agent of the corporation in compliance with the provisions of Sections 602 and 607, Florida Statutes.

Signed: **Serguei Novikov, President of Nord Group, Inc.** *[Signature]* **5/2/95**

| 12. OFFICERS AND DIRECTORS | | 13. ADVERTISING CHANGE OF REGISTERED OFFICE | |
|----------------------------|--|---|---|
| NAME | DP NOVIKOV, SERGUEI C/O 1221 BRICKELL AVE., 23RD FLOOR MIAMI FL 33131 | 1. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DT KOUPEEVA, VICTORIA C/O 1221 BRICKELL AVE., 23RD FLOOR MIAMI FL 33131 | 2. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DV RODNEVSKI, PAVEL C/O 1221 BRICKELL AVE., 23RD FLOOR MIAMI FL 33131 | 3. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DT KOUPEEVA, VICTORIA C/O 1221 BRICKELL AVE., 23RD FLOOR MIAMI FL 33131 | 4. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 7. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 8. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 9. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 10. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I declare to certify that the information supplied with this filing is voluntarily furnished and is correct and valid, for the purpose of state law for the State of Florida Statutes. I further certify that the information made available in the annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made in person. I understand the provisions of Sections 602 and 607, Florida Statutes, and that my name appears on the back of Block 13 of this report as an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF MONITORING OFFICER OR DIRECTOR

3/2/95