

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000075908 (1)

1. Corporation Name

GREGROM EXPORT CORP.

Principal Place of Business

113 NE 3RD ST
HALLANDALE FL 33009

Mailing Address

113 NE 3RD ST
HALLANDALE FL 33009



2. Principal Place of Business

2a. Mailing Address

21 218 E. COMM'L BLVD.

26 Suite, Apt. #, etc.

22 208 F

27 City & State

23 FT. LAUDERDALE

28 Zip

24 33308

25 BRUNARD

29 Zip

26 33308

27 BRUNARD

30 Zip

9. Name and Address of Current Registered Agent

KELS, ELLIOT
113 NE 3RD ST
HALLANDALE FL 33009

3. Date Incorporated or Qualified

10/17/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0526216

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

10. Name and Address of New Registered Agent

81 Name

GREGORI ROMENSKI

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

218 EAST COMMERCIAL BLVD.

83

SUITE 208 F

84 City

FT. LAUDERDALE

FL

85 Zip Code

33308

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

GREGORI ROMENSKI

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when resigning)

03-16-96

Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DP
ROMENSKI, GREGORI
113 NE 3RD ST
HALLANDALE FL 33009

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DV
ILICH, ANATOLIY
113 NE 3RD ST
HALLANDALE FL 33009

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DS
KHOMINA, LIDIYA
113 NE 3RD ST
HALLANDALE FL 33009

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
D
KELS, ELLIOT
113 NE 3RD ST
HALLANDALE FL 33009

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
218 E. COMM'L BLVD. #208 F
FT. LAUD. FL 33308

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
ANATOLI KOBKO
218 E. COMM'L BLVD. #208 F
FT. LAUD. FL 33308

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
121 NE 3RD ST
HALLANDALE, FL 33009

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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:

GREGORI ROMENSKI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-16-96

Date

Daytime Phone #

CR2E034 (12/95)