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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State . . • DIVISION OF CORPORATIONS

1996

FILED May 01 1996 8:00 am

DOCUMENT # p950000#31326				Secretary of State	
•	ALEXANDER CORP.				
Principal Place of Business Mailing Address 122 178th Avenue W. Redington Shores, FL 33708			SAME		
	- •			3. Date incorporated or Qualified 4/21/95	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3311881	Not Applicable \$8.75 Additional
Suite, Apt. #	#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	Fee Required
Oity & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for Florida Statutes X Yes	intangible tax under s. 199.032. D No
24	9. Name and Address of Curren	29	[30]	10. Name and Address of New F	
		. Hogiototo ngoti	81 Name		
OLEG	CHEVERDINE		82 Street Addr	ess (P.O. Box Number is Not Acceptate	ole)
122 178th Avenue w.					
Redi	ngton Shores, FL	33708	83		
•			84 City		FL 85 Zip Code
				ration submits this statement for the pured of directors. Thereby accept the app	- Labragian de registered office
or register familiar wi	to the provisions of sections (and document and document and agent, or both, in the State of Floric th, and accept me duligations of Sections (Control of Sections	da, Such change was authorion 607.0505, Florida Statut	rized by the corporation's boales	ration submits this statement for the purific of directors. Thereby accept the app	ointment as registered agent. I am
SIGNATURE .	Signature, typed with an inabic of registered upont	and the Laupi debie (Ni līz Plagisteros Aivet sejnativs, rospile		ICERS AND DIRECTORS IN 12
12.	C OFFICERS ANI	DIDIRECTORS	13.	ADDITIONS/CHANGES TO OF	Change Addit on
TITLE	PRESIDENT	["] [\(\text{left} \)	1. TILE		
NAME	OLEG CHEVERDINE		1 3 STREET ADORESS		
STREET ADDRESS	122 178th Avenu	e •	1.4 CHY-ST-7IP		
CITY-ST-7IP TITLE	Redington Shore	s, FL 33708	2 1 TI'LE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CHY-ST-ZIP			2.4 City - S1 - Ziff		Change Addition
TITLE	VICE Presider	☐ DELLETE	3 1 7171.6		Programme Programme
NAME	Elena Outis	#12.55	3.2 NAME		
STREET ADDRESS	12650 GAJE BMS	TI 4.4300	3.3 STREET ADDRESS		
CITY - ST - ZIP	Redunton Shores	DELETE	4 1 TILLE		Change Addition
TITLE NAME			4.2 NAM:		
STREET ACCURESS			4.3 STREET ADDRESS	2000018	23952
CITY-ST-ZIP			4.4.0(1Y+ST+Z)?	2000018 05/16/9601	013028
TITLE		☐ DELETE	5 1 TITLE	***200.00	Change Addition
NAME			5.2 NAM÷		
STREET ADDRESS			5 3 STHEET ADDRESS		1 -17
CITY-ST-ZIP		r ne, r re	5.4 CITY - ST - 7/P		Change P Adoltion
TITLE		☐ DELETE	6 1 TITLE 6 2 NAME		
NAME			6.3 STREET ADDRESS		Coldo
STREET ADDRESS			6 4 CITY - ST - ZIP		$\mathcal{J} \cap \mathcal{J} \cap $
CITY ST-ZIP	1		V 7 V 11 O1 Z11		

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 coats; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayting Phone Printed Print