

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

May 01 1996 8:00 am
Secretary of State

DOCUMENT # P95000048583 (5)

1. Corporation Name

LENI TRADING, INC.

Principal Place of Business

4300 SHERIDAN ST., SUITE 228
HOLLYWOOD FL 33021

Mailing Address

4300 SHERIDAN ST., SUITE 228
HOLLYWOOD FL 33021



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

06/21/1995

3a. Date of Last Report

4. FEI Number

65-0600269

Applied 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. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KHMELNIKER, LEONID
1351 NE MIAMI GARDENS DR #1724E
NORTH MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent

81 Name MIKHAIL HARTSIKOV
82 Street Address (P.O. Box Number is Not Acceptable)
4300 SHERIDAN ST., SUITE 228
83
84 City HOLLYWOOD FL 85 Zip Code 33021

11. Pursuant to the provisions of Sections 607.0802 and 607.1503, 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 obligation of Section 607.0805, Florida Statutes.

SIGNATURE

[Signature]

MIKHAIL HARTSIKOV

M.H.

06.26.96

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME MIKHAIL HARTSIKOV
STREET ADDRESS 4300 SHERIDAN ST #228
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE VICE PRESIDENT
NAME LEONID KHMELNIKER
STREET ADDRESS 1351 NE MIAMI GARDENS DR #1724E
CITY-ST-ZIP N.M.B. FL 33179

TITLE VICE PRESIDENT
NAME OLEG LITVINOV
STREET ADDRESS LEMBITU 6#6
CITY-ST-ZIP TALLINN ESTONIA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

25. TITLE
26. NAME
27. STREET ADDRESS
28. CITY-ST-ZIP

29. TITLE
30. NAME
31. STREET ADDRESS
32. CITY-ST-ZIP

33. TITLE
34. NAME
35. STREET ADDRESS
36. CITY-ST-ZIP

37. TITLE
38. NAME
39. STREET ADDRESS
40. CITY-ST-ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY-ST-ZIP

45. TITLE
46. NAME
47. STREET ADDRESS
48. CITY-ST-ZIP

49. TITLE
50. NAME
51. STREET ADDRESS
52. CITY-ST-ZIP

53. TITLE
54. NAME
55. STREET ADDRESS
56. 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIKHAIL HARTSIKOV

04.30.96

CR2E034 (12/95)