FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 👝 🔒

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000089217 (0)

NATASHA INTERNATIONAL USA, INC.

Principal Place of Business

Mailing Address

FILED

97 JUL -2 AM 11: 04

SECRETARY OF STATE TALLAHASSEE, FLORIDA



4085 CROCKERS LAKE SARASOTA FL 34238	BOULEVARD, UNIT 2728	4065 CROCKERS LAKE BOULEVARD. UNIT 2728 SARASOTA FL 34238-5548								
	4-4					3. Date Incorporated or Qualified 11/21/1995		te of La 9/19 9	ast Report	
2. Principal Place of I	Businėss	2a. Mailing Address	S			4. FEI Number APPLIED FOR 65-0	6232	2110	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, et	c.						75 Additional	
22		27			5. Certificate of Status Desired		Fe	e Required		
City & State		City & State				6. Election Campaign Financing	C.3		.00 May Be	
Zip	Country	28	Cou	intrv		Trust Fund Contribution			ded to Fees	
24	25	29 30				This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
9. N	ame and Address of Curre		11			10. Name and Address of New Reg	: <u> </u>	gent		
THE LAW F	IRM OF LAWRENCE J S	PIEGEL CHRTD		81	Name					
343 ALMER				82	Street Add	ress (P.O. Box Number is Not Acceptab	1e)		· · · · · · · · · · · · · · · · · · ·	
CORAL GAI	BLES FL 33134									
				83						
				84	City		FL	85	Zip Code	
11. Pursuant to the or	ravisions of Sactions 607 05	02 and 607 1508. Florida	Statutes, the at	חחער	a-named cor	poration submits this statement for the pi		changi	ing de togistoro	
office or registere	d agent, or both, in the State ar with, and accept the oblig	e of Florida. Such change	was authorized	d by	the corpora	tion's board of directors. I hereby accep	t the appo	ointmer	nt as registered	
	ar warr, and accept the conf	ganona or, acciron oor.oo	JO, 1 IOFICIA GIAI	utes	,					
SIGNATURE Signature	typed or printed name of registered ag	ont and title if applicable	(NOTE: Registered	egA b	int signature requi	ired when reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND			
TRILE PD	ANOU VENOCNIV	☐ DELET				2000022	برجود	والم ليا	nge L Additio	
	IANOV, YEVGENIY CROCKERS LAKE BOUL	EN/ADD LIMIT 0709	1.2 NA			-07/08/	970	1040) 016	
	SOTA FL 34238	LIMID, ONIT ETEO			ADDRESS	3000022 -07/08/9 *****169	5.00	米米米	*165.00	
TITLE SID	0017111101100	DELET	1,4 CI E 2.1 TI		1 - ZIP			☐ Cha		
	IANOV, ANATOLIY		2.2 NA						gc	
	CROCKERS LAKE BOUL	EVARD, UNIT 2728			ADDRESS					
CITY-ST-ZIP SARA	SOTA FL 34238		2.40	TY-S	ST-ZIP					
TITLE		☐ DELET	E . 31 TII	ſιE				Cha	nge 🔲 Additio	
NAME			3 2 NA	ME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		DELET	3 4, CI E 4.1 TIT		S1 - ZIP			Cha	nge 🔲 Addition	
NAME		_ 0	4.1 11			n		L UIA	inge Li Audritui	
STREET ADDRESS					ADDRESS	0£	Λ			
CITY-ST-ZIP			4.4 CIT				71			
TITLE		DELET				(, N)		Cha	nge 🔲 Addition	
NAME			5.2 NA	ME		// `				
STREET ADDRESS			5.3 \$1	REFU	ADDRESS	`				
CITY-ST-ZIP			5.4 CH		T - ZIP					
TITLE		DELET			Į			Chai	nge 🔲 Additio	
NAME CTOURT ADDRESS			62 NA							
STREET ADORESS					ADDRESS .					
CITY-ST-ZIP			6.4 CIT	17-5	l - ZiF'					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.