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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000004284

1. Corporation Name

E.H. GENERAL, INC.

## Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90113 009 \*\*\*150.00

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Principal Place	e of Business	Mailing Add	ress			1 100/(40) (10 10)			
1155 S. SEMOR	RAN BLVD	1155 S. SEM	ORAN BLVD						
1118		1118	*** ** *=****						
WINTER PARK	FL 32792	WINTER PARI	K FL 32792					N THIS SPACE_	
US		US				3. Date Incorporated	or Qualifed		1
						01/08/1996			
2. Principal P	lace of Business	Address			4. FEI Number	, ,	. <del>    -  </del>	plied For	
21		26 ~-				<u>59-3358814</u>			ot Applicable
Suite, Apt.	#, etc.	Suite, Ap	ot. #, etc.			5. Certifcate of Status	Desired	1	Additional equired
22		27							
City & Stat	e	City & S	tate			6. Election Campaign	- 1		May Be
23		28		Countr		Trust Fund Contrib			to Fees
Zip	Country	Zip	۳۰۰	Countr □	у	8. This corporation ov		year intangible ☐ Yes	<b>X</b> No
24	25	29	30	21		Personal Property  10. Name and Addres			MINO
	9. Name and Address of Curre	nt Registered Age	ent	8	Name				
DOH.	IL, FRANK L			"	" Name TE	PLITSKY Iress (P.O. Box Number is	ILGO	ാമ	
l .	WEST CANTON AVENUE		•	8:	2 Street Add	ress (P.O. Box Number is	Not Acceptable	)	
l	E 410								
,				8:	³\ // 5 ≤	5 5, 35 M	ORAN	BLVD #	-1118
ANIM	TER PARK FL 32790			8	City			85 Zip	Code
		2		1	1 11 1 1 1	NTER PA	rric	<u> </u>	7792
11. Pursuant	to the provisions of Sections 607 755 registered agent, or both, in the state	02 and 607.1508,	Florida Statutes	the abo	ve-named con	poration submits this stater	nent for the pur	pose of changing its re appointment as re	registered egistered
office or r	egistered agent, or both, in the state im familiar with, and accept the obliga	ations of Section (	nange was autr 307.0305, Florid	a Statute	y tile corporati S.	ion's board of directors. Th	ereby accept in	в арронинен цо т	9.0.0.00
SIGNATURE		> _	-I60			TOKY	APRI	L 15.19	99
SIGNATURE	Signature, typed or printed name of registered age	(NOTE: Re	gistered Ag	ent signature requir	ed when reinstating)		DATE		
12.	OFFICER8 A	ND DIRECTORS		13.		ADDITIONS/CHANG	SES TO OFFIC		
TITLE	0	1	☐ DELETE	1.1 TITLE				Change	Addition
NAME	TEPLITSKY, IGOR			1.2 NAME					
STREET ADDRESS 1155 S SEMORAN BLVD, SUITE 1118				1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL 32792			1.4 CITY-	ST-ZIP				
TITLE	D		DELETE	2,1 TITLE				Change	☐ Addition
NAME	NIKITINE, VADIM			2.2 NAME					<b>\</b>
STREET ADDRESS	-668 N ORLANDO AVE SUITE	105		2,3 STRE	ET ADDRESS -	ه بغيبو سين کای اسان اساس		<u> </u>	
CITY-ST-ZIP	MAITLAND FL 32751			2.4 CITY	ST-ZIP				
TITLE		[	DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME	1			3,2 NAME	:				}
STREET ADDRESS	[			3.3 STRE	ET ADDRESS				
CITY-ST-ZIP				3.4. CITY-	ST-7!P				
TITLE			DELETE	4.1 TITLE				☐ Change	☐ Addition
NAME	ì			4, 2 NAMI	ĵ				1
					ET ADDRESS				
STREET ADDRESS				-					
CITY-ST-ZIP			DELETE	4.4 CITY- 5.1 TITLE		<del></del>		☐ Change	Addition
TITLE	)	'		5.2 NAME	4				
NAME					ET ADDRESS		i		
STREET ADDRESS				į.					}
CITY-ST-ZIP			Class STE	5.4 CITY- 6.1 TITLE				Change	Addition
TITLE		Į	☐ DELETE	6.2 NAME	- 1				
NAME									
STREET ADDRESS					ET ADDRESS				

14. I 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 or an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFF