

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

PROFIT CORPORATION
ANNUAL REPORT
1999 AMENDED

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000085545

1. Corporation Name

Gwen Bari's Those Were The Days, Inc.

Principal Place of Business

Mailing Address

9625 Riverside Dr.
D-3
Coral Springs, FL 33071

same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/16/96

4. FEI Number

65-0708132

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 9625 Riverside Dr.

Suite, Apt. #, etc.

22 # D-3

City & State

23 Coral Springs, FL

Zip

24 33071

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 City & State

29 Zip

Country

30 33071

9. Name and Address of Current Registered Agent

Kirill Mushlin
5568 Courtyard Dr.
Margate, FL 33063

10. Name and Address of New Registered Agent

81 Name

Tatiana Mushlin

82 Street Address

9625 Riverside Dr.

83 Suite, Apt. #, etc.

D-3

84 City

Coral Springs,

FL

85 Zip Code

33071

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE President/Director ☒ DELETE

NAME Kirill Mushlin

STREET ADDRESS 5568 Courtyard Dr.

CITY-ST-ZIP Margate, FL 33063

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

11 TITLE

President/Director/Secretary ☐ Change ☐ Addition

12 NAME

Tatiana Mushlin

13 STREET ADDRESS

9625 Riverside Dr. #D-3

14 CITY-ST-ZIP

Coral Springs, FL 33071

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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 on an attachment with an address, with all other officers empowered.

SIGNATURE:

Tatiana Mushlin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
05/17/99 (954) 346-0713

FILED

20 JUN 29 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E034 (11/98)