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

CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000018981 (5)

SEMYON & SON, INC.

Į	Principal Place of Business	Mailing Addre
	1427 ALTON RD. Miami Beach Fl 33139	1427 ALTON F MIAMI BEACH

## FILED Mar 19 1998 8:00am Secretary of State

FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1997 2. Principal Place of Business 2a, Mailing Address Applied For 65-0737715 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes **⊠** No g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WASSERMAN, MARTIN W 999 WASHINGTON AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33139 83 84 City 85 Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Standard typed or printed name of registered agent and their flapplicable. (NOTE: Registered Agent aignature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 DELETE THILE 1.1 TITLE Change \_\_\_ Addition GOROKHOVSKY, SEMYON NAME 1.2 NAME 1427 ALTON RD. STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change GOROKHOVSKY, ALEVTINA NAME 2 2 NAME 1427 ALTON RD. STREET ADDRESS 23 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 2.4 CITY-\$T-ZIP DELETE Change Addition TITLE 3.1 TITLE GOROKHOVSKY, OLEG NAME 3.2 NAME 1427 ALTON RD. STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL 33139 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I horeby 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 supplicmental 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.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

54 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

TITLE

NAME

GOROXHOVSKY

DELETE

DELFTE

Change

Change

\_\_\_ Addition

Addition