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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000089625 (2) MADE IN RUSSIA, INC.

## **FILED** Feb 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 150 WORTH AVE. SUITE 216 PALM BEACH FL 33480 150 WORTH AVE., SUITE 216 PALM BEACH FL 33480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 10/17/1997</u> 2a. Mailing Address 2. Principal Place of Business Applied For 65 - 0787648 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28] Trust Fund Contribution Added to Fees 23 Country Country Zip This corporation owes or has paid the current year Intangible Yes □ No 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 LATHAM, PENE 150 WORTH AVE., SUITE 216 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 83 84 City 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) DATE Signature, typod or printed tivos, of registered agent and title if apple abi-OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE 1.1 TITLE ☐ Addition TITLE NAME LATHAM, PENE 1.2 NAME 150 WORTH AVE., SUITE 216 STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH FL 33480 CITY - ST - ZIP 1.4 C(TY-ST-7)P DELETE Channe Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-2IP DELETE 3.1 TITLE ☐ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Channe TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - 7IP 54 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. 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 arrural report or suppliemental arrural 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: