2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State DOCUMENT # P98000089119 1. Entity Name DAYS HOLDING, INC. 05-03-2001 90065 042 ***150.00 Mailing Address Principal Place of Business PO BOX 1552 3901 SOUTH OCEAN DRIVE HALLANDALE FL 33008 SUITE 1B HOLLYWOOD FL 33019 3. Mailing Address 2. Principal Place of Business 16300 NE 19 AV P.O. BOX # 1552 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. # 104 Applied For City & State City & State 4. FEI Number 65-0876042 iami Hallandale Not Applicable Country USA Zip \$8.75 Additional 5. Certificate of Status Desired 33008 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Russian Yellow Pages, IVC **AMERILAWYER** 343 ALMERIA AVENUE **CORAL GABLES FL 33134** V. Miami Beh 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE CHOREVALEXEY 3901 S. Deean Dr KHOREV, ALEXEY NAME STREET ADDRESS STREET ADDRESS 3901 SOUTH OCEAN DRIVE Maleywood FL 33019 CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33019 Change ☐ Addition TITLE ☐ Delete TITLE LUGOVESOVQ YULIG NAME LUGOVTSOVA, YULIA V NAME STREET ADDRESS STREET ADDRESS 3901 S. Ocean Dr 3901 SOUTH OCEAN DRIVE HOLLYWOOD FL 33019 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD_FL_33019 TITLE Change Addition ☐ Defete TITLE KALIOUSTON SCREUEL NAME KHILOUSTOV, SERGUEI A NAME STREET ADDRESS 3901 Stocean Pr Hollywood FL 33019 STREET ADDRESS 3901 SOUTH OCEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33019 ☐ Addition TITLE **GM** Delete TITLE RYABON ALEX 3901 S. Ocean On Ap# 60 NAME RYADOR, ALEXEY NAME STREET ADDRESS STREET ADDRESS 3901 S OCEAN DR APT 6Q Kollywood FL 33019 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33019 Delete ☐ Change ☐ Addition TITI F TITLE MORONAYA Julia NAME NAME KHILIOUSTOVA, OLGA A STREET ADDRESS STREET ADDRESS 3901 S OCEAN DR APT 1B CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33019 ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.