Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90123 014 ***150.00

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 # P98000092685

1. Corporation Name

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Principal Place 118 NW 5TH ST FORT LAUDERD	.	Mailing Address 118 NW 5TH ST FORT LAUDERDALE FL 33301			<u> </u>			DO NOT WR		,	
,						7	 Date Incorpo 10/30/199 	rated or Qualifed			
2. Principal Place of Business 2a. Mailing Address							4. FEI Number			App	olied For
21 26							65-08	73142		Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #,							5. Certifcate of	Status Desired		\$8.75 A Fee Red	
27								_			·
City & State	e	City & State 228			'	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip	Cou	ntry			8. This corporat	tion owes the cur	rent year l	ntangible	
24	25	29 30	5				Personal Pro				∑ No
	9. Name and Address of Current	Registered Agent				1	0. Name and A	ddress of New	Registere	d Agent	
	CK MOGBO, P.A.			81 82	Name Street As	ddraen	/P.O. Box Num	ber is Not Accept	ahla)		
2331 NORTH STATE RD 7, STE 124				02	Slieet At	Juless	(1 .O. DOX 14dill	_	ubic,		
LAUI	DERHILL FL 33313			83							
				84	City				F	85 Zip C	Code
				ĻĻ				atatament for the			rogistorad
l office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was auth	orized	by i	tne corpora	ation's	board of directo	rs. I hereby acce	pt the app	ointment as reg	pistered
SIGNATURE									DATE		
	Signature, typed or printed name of registered agent OFFICERS AND		J	Agen	t signature requ	uired whe		HANGES TO OF		ND DIRECTO	PS IN 12
12.	D OFFICERS AND	DELETE	13.				ADDITIONS/C	ITANGES TO OI	/ ICENS /	Change	Addition
	NAJDENOV, NIKOLAY V	_ VELL(L	1.2 NA							0	
NAME	19-67 TIMUROVTSEV ST, KHAR	K O V 310170			ADDRESS						
STREET ADDRESS	UKRAINE	1.04 010110									
CITY-ST-ZIP	D	☐ DELETE	1.4 Cr 2.1 TJ		1-23P					□ Change	Addition
			2.2 NAME								
NAME	2-311 DERZHAVINSKA ST, KHA	DKAV 310001			ADORESS						
STREET ADDRESS	UKRAINE	INOV STOOL									
CITY-ST-ZIP	D	☐ DELETE	2.4 C		1-219					↓ ☐ Change	☐ Addition
TITLE	YAROSH, VLADIMIR		3.2 NA		-		•		: 7	*, 🗀 *********	
NAME	1817 SOUTH OCEAN DR. #228				4000500						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	HALLANDALE FL 33009	☐ DELETE	3.4. C		i- ZIP		-		·	□ Change	Addition
TITLE					ļ					C1 01101190	
NAME			4. 2 N				•				
STREET ADDRESS	ı				ADDRESS				•		:
CITY-ST-ZIP		☐ DELETE	4.4 CF		r-ZIP		-			Change	Addition
TITLE		☐ DELETE	5.1 TI	ILE	1			•			C CAGINOLI

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 charged, or on an attachment with an address, with all other like empowered.

52 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

DENANTROLAYENATOENOV

Change

Addition