

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000003694

1. Entity Name

ACHTAMAR USA, INC.

FILED

Jan 22, 2000 8:00 am
Secretary of State

01-22-2000 90011 015 ***150.00

Principal Place of Business

Mailing Address

2621 RIVERSIDE DRIVE #4
CORAL SPRINGS FL 33065

2621 RIVERSIDE DRIVE #4
CORAL SPRINGS FL 33065-5578

00003885



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

704 S FEDERAL HWY

704 S FEDERAL HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
FORT LAUDERDALE FLORIDA

City & State
FORT LAUDERDALE FLORIDA

4. FEI Number

65-0886065

Applied For

Not Applicable

Zip

Country

33316

BROWARD

Zip

Country

33316

BROWARD

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVINE & SEGAL, P.A.
SUITE A-106
4300 N. UNIVERSITY DRIVE
FORT LAUDERDALE FL 33351

Name
ARTHUR MIKIRTYCHEV

Street Address (P.O. Box Number is Not Acceptable)
704 S FEDERAL HWY

City
FORT LAUDERDALE

FL

Zip Code
33316

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 ARTHUR MIKIRTYCHEV

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

(NOTE: Registered agent signature required when reinstating)

01/01/2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
ARTHUR MIKIRTYCHEV
2337 NW 89TH DR #601
CORAL SPRINGS FL-33065

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE: ARTHUR MIKIRTYCHEV

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/01/2000 (954) 763-5151