

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

55 MAY - 1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V49484** (1)

1. Corporation Name
RUSSIAN TRADE & TRAVEL, INC.

Principal Place of Business Mailing Address
1401 BRICKELL AVE #1020 MIAMI FL 33131 **300 71ST ST STE 405 MIAMI FL 33141 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/10/1992** 3a. Date of Last Report **01/31/1994**
4. FEI Number **65-0346184** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 **300 71ST ST.** 26
22 **Suite 570** 27 **Suite 570.**
23 **MIAMI, FLORIDA.** 28
24 **33141** 25 **USA** 29 30

5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL**

81 Name **SANFORD Z. CHEVLIN, P.A.**
82 Street Address (P.O. Box Number is Not Acceptable) **409 NW 10th TERRACE**
83
84 City **Hallandale** FL 85 Zip Code **33009**

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 **SANFORD Z. CHEVLIN, P.A.** DATE **5/1/95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **GOLOSHAPOV, YULI ALKLA**
STREET ADDRESS **5700 COLLINS AVE 1203**
CITY ST ZIP **MIAMI BCH FL**

11 TITLE **President, DIRECTOR** Change Addition
12 NAME **GOLOCHTCHAPOV, IOLLI**
13 STREET ADDRESS
14 CITY ST ZIP

TITLE **D**
NAME **CHTCHETINIVE, MAXIM**
STREET ADDRESS **99 LENINSKY ST #450**
CITY ST ZIP **ST PETERSBURG RU**

21 TITLE **vice-president, DIRECTOR** Change Addition
22 NAME **CHTCHETINIVE, MAXIM**
23 STREET ADDRESS
24 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **[Signature]** **President** DATE **5/1/95** **302-868-9061**