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

SPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V60403

1. Corporation Name

STREET ADORESS

STREET ADDRESS

STREET ADORESS

CJTY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

RUSSIAN SPHERE, INC.

Principal Place of Business Mailing Address						
185 RITA BOULEVARD POST OFFICE BOX 380336						
1		MELBOURNE FL 32936				
US						DO NOT WRITE IN THIS SPACE
1						3. Date Incorporated or Qualifed
		<u> </u>				08/27/1992
2. Principal Place of Business 2a. Mailing Address			_			4. FEI Number Applied For
21 26					59-3143379 Not Applicable	
<u> </u>	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
22	27				Fee Required	
<u> </u>	City & State City & State					6. Election Campaign Financing \$5.00 May Be
23	- 	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		intry		This corporation owes the current year Intangible
24	25 29 30				Personal Property Tax. ☑ Yes □ No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
KRASNY, GARY MITCHELL				81	Name	
185 RITA BLVD.				82	Street Addres	ss (P.O. Box Number is Not Acceptable)
MELBOURNE BEACH FL 32951						
MCEDUCANE DEACH FL 32931				83		
				84	City	■■ 85 Zip Code
					City	FL 189 2000
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						(hen reinstating) DATE
12. OFFICERS AND DIRECTORS 13.			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition
NAME	Krasny, Gary Mitchell	1.2 N		ME		
STREET ADDRESS	185 RITA BLVD. 138		1.3 ST	REET	ADDRESS	
CITY-ST-ZIP	MELBOURNE BEACH FL		1.4 CF	TY-ST	-ZIP	
TITLE			2.1 TII			☐ Change ☐ Addition
NAME			2.2 NA	ME		İ
STREET ADDRESS	TADDRESS 2.3			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CI	TY-SI	T-ZIP	
TITLE			3.1 TIT			☐ Change ☐ Addition
NAME			3.2 NA	ME		_ · · -
STREET ADDRESS	22.0				ADDRESS	
CITY-ST-ZIP	2 P		3.4. CI			· ·
TITLE		☐ DELETE	4.1 TIT	_	1- 41	☐ Change ☐ Addition
NAME		= ::-	4. 2 N/			C - mge Charach
471111			7. 4 147	તત્ર€	i	\

6.4 CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

REARY MITCHELL SIGNATURE:

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

DELETE

Change

Change

☐ Addition

Addition

FILED

Jan 21, 1999 8:00am

Secretary of State

01-21-1999 90035 046 ***150.00