### **2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000020116

Entity Name: NEIZVEST FINANCIAL RISK MANAGEMENT INC.

FILED
Apr 15, 2014
Secretary of State
CC3093270915

## **Current Principal Place of Business:**

430 TIMBERWALK CT.

# 1017

PONTE VEDRA BEACH, FL 32082

# **Current Mailing Address:**

430 TIMBERWALK CT #1017 PONTE VEDRA, FL 32082 US

FEI Number: 45-4672723 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NEIZVEST, LEYA 430 TIMBERWALK CT PONTE VEDRA, FL 32082 US

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:

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title PTD Title VPD

Name NEIZVEST, LEYA Name NEIZVEST, DAMIEN

Address 430 TIMBERWALK CT #1017 Address 430 TIMBERWALK CT. #1017

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SD

Name NEIZVESTNAYA, TATYANA
Address 430 TIMBERWALK CT. #1017
City-State-Zip: PONTE VEDRA BEACH FL 32082

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LEYA NEIZVEST

Electronic Signature of Signing Officer/Director Detail

**EXECUTIVE OFFICER** 

04/15/2014