

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**  
  
95 MAR -7 AM 11:40  
  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 192285 (5)**

1. Corporation Name  
**RUSSELL ENGINEERING, INC.**

Principal Place of Business Mailing Address  
**2530 S.W. 36TH STREET 2530 S.W. 36TH STREET**  
**FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/11/1956** 3a. Date of Last Report **02/15/1994**  
4. FEI Number **59-0767981** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75 Additional**  
Fee Required  
6. Election Campaign Financing ☐ **\$5.00 May Be**  
Trust Fund Contribution Added to Fees  
8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RUSSELL, GEORGE L. SR.  
15438 SW 31ST ST  
DAVE FL 33331**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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 registering)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME                   | STREET ADDRESS      | CITY - ST - ZIP   |
|-------|------------------------|---------------------|-------------------|
| PD    | RUSSELL, GEORGE L. SR. | 15438 SW 31ST ST    | DAVE, FL 00000    |
| VD    | AKINS, RONALD E.       | 11801 NW 15TH COURT | PEMBROKE PINES FL |
| ST    | RUSSELL, KAREN S       | 15438 SW 31ST       | DAVE, FL 00000    |
|       |                        |                     |                   |
|       |                        |                     |                   |
|       |                        |                     |                   |
|       |                        |                     |                   |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE           | Change | Addition |
|---------------------|--------|----------|
| 1.2 NAME            |        |          |
| 1.3 STREET ADDRESS  |        |          |
| 1.4 CITY - ST - ZIP |        |          |
| 2.1 TITLE           | Change | Addition |
| 2.2 NAME            |        |          |
| 2.3 STREET ADDRESS  |        |          |
| 2.4 CITY - ST - ZIP |        |          |
| 3.1 TITLE           | Change | Addition |
| 3.2 NAME            |        |          |
| 3.3 STREET ADDRESS  |        |          |
| 3.4 CITY - ST - ZIP |        |          |
| 4.1 TITLE           | Change | Addition |
| 4.2 NAME            |        |          |
| 4.3 STREET ADDRESS  |        |          |
| 4.4 CITY - ST - ZIP |        |          |
| 5.1 TITLE           | Change | Addition |
| 5.2 NAME            |        |          |
| 5.3 STREET ADDRESS  |        |          |
| 5.4 CITY - ST - ZIP |        |          |
| 6.1 TITLE           | Change | Addition |
| 6.2 NAME            |        |          |
| 6.3 STREET ADDRESS  |        |          |
| 6.4 CITY - ST - ZIP |        |          |

14. I hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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 1007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/95 (305) 321-9326  
Date Signature