

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 528838

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** ROSS REALTY INVESTMENTS, INC.

**Current Principal Place of Business:**

3325 S UNIVERSITY DRIVE  
210  
DAVIE, FL 333282120 US

**New Principal Place of Business:**

**Current Mailing Address:**

3325 SOUTH UNIVERSITY DRIVE, 2ND FLOOR  
DAVIE, FL 333282020

**New Mailing Address:**

**FEI Number:** 59-1739461

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSS, BARRY  
3325 SOUTH UNIVERSITY DRIVE, 2ND FLOOR  
DAVIE, FL 333282020 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ROSS, BARRY  
**Address:** 3325 S UNIVERSITY  
**City-St-Zip:** FORT LAUDERDALE, FL 33328

**Title:** ST  
**Name:** ROSS, DIANE  
**Address:** 3325 S UNIVERSITY  
**City-St-Zip:** FORT LAUDERDALE, FL 33328

**Title:** VP  
**Name:** COHEN, HAL J.  
**Address:** 3325 S UNIVERSITY DR  
**City-St-Zip:** FORT LAUDERDALE, FL 33328

**Title:** VLP  
**Name:** REISS, ADAM J  
**Address:** 3325 S UNIVERSITY DR., 210  
**City-St-Zip:** DAVIE, FL 33328

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:** BARRY ROSS

P

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date