

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # 590655

(7)

RUSTIN, INC.

Principal Place of Business: Harold Rustin
1121 Crandon Blvd, E306
Key Biscayne, FL 33149
Mailing Address: Harold Rustin
1121 Crandon Blvd, E306
Key Biscayne, FL 33149

3. Date Incorporated or Qualified: 10/20/1978
3a. Date of Last Report: 03/15/1994
4. FET Number: 59-1864378
Applied For: Not Applicable
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

2. Principal Place of Business: 21. SAME AS MAILING ADDRESS
2a. Mailing Address: 26. 799 BRICKELL PLAZA
Suite, Apt. #, etc.: 27. #900
City & State: 28. Miami, FL
Country: 29. 33131
Zip: 30. Dade

RUSTIN, HAROLD
104 CRANDON BLVD, SUITE 412
KEY BISCAIYNE, FL 33149

10. Name and Address of New Registered Agent
81. Name: Joseph J. Weisenfeld
82. Street Address (P.O. Box Number is Not Acceptable): 799 Brickell Plaza, Ste #900
83.
84. City: Miami FL 85. Zip Code: 33131

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, am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when resigning) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PD Rustin, Harold 1121 Crandon Blvd, E306 Key Biscayne, FL 33149	1.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	VP	1.2 NAME	
CITY - STATE - ZIP	Greaves, Gary C. 10415 S.W. 87th ave. Miami, FL	1.3 STREET ADDRESS	
		1.4 CITY - ST - ZIP	
		2.1 TITLE	☒ Change ☐ Addition
		2.2 NAME	
		2.3 STREET ADDRESS	Delete
		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	

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14. I hereby certify that the information supplied with 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 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.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Harold Rustin

CR2E034 (12/95)