2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 652761

1. Entity Name
RAND-RUSS CORP.

Principal Place of Business	Mailing Address
1301 N. HAVERHILL RD. WEST PALM BEACH, FL 33417 US	1301 N. HAVERHILL RD. WEST PALM BEACH, FL 33417 US

DO NOT WRITE IN THIS SPACE

03112003   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-1968945	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSS, HOWARD
1301 N. HEVERHILL RD.
WEST PALM BEACH, FL 33417

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROSS, HOWARD
STREET ADDRESS	7427 WATER DANCE WAY
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	SD
NAME	ROSS, SYDNEY S
STREET ADDRESS	7427 WATER DANCE WAY
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	TD
NAME	SMILOWITZ, MILDRED
STREET ADDRESS	9080 TERNI LANE
CITY-ST-ZIP	BOYNTON BEACH, FL

U00000161300
05/24/04-80002-023 150.00

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Howard D. Ross_   5/19/04   561-689-3333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #