FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J83735

RUSSELL CHILDREN'S TRUST, INC

(7)

FILED Apr 28 1998 8:00am Secretary of State

	LE OFFICENCIO MOOT,				
Principal Plac	ce of Business	Mailing Address	*···*-	I INCRECA MENI IMENI ILEIF INDUK ISINI ANY RINIS A	icket dialf dialf didit fekt) teat
P.O. BOX 658 P.O. BOX 858					
OPA LOCKA FL 33054 OPA LOCKA FL 33054					
				DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		07/17/1987 4. FEI Number	
21	1800 01 (303)11033	26		65-0053132	Applied For
Suite, Apt.	. #. etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	g, Name and Address of Cur	·· ·· · · · · · · · · · · · · · · · ·		10. Name and Address of New Register	ed Agent
	MON, SCHINDLER, HURST & 8	SANOBERG, P.A.	81 Name		
	92 S. MIAMI AVE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MU	AMI FL 33130				
			83		
			84 City		85 Zip Code
			'		'L
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob	#502 and 607.1508, Florida Statute ate of Florida Such change was a ligations of, Section 607.0505, Flo	es, the above-named corp outhorized by the corpora orida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE					
	Signature, typed or printed harno of registered		Registered Agent signature requi		
12.		NND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D D	DELETE	1.1 TITLE		Change Addition
NAME	RUSSELL, GEORGE L.		1.2 NAME		
STREET ADDRESS	2801 S.W. 31ST AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	HALLANDALE FL		1.4 City-St-ZIP		
TITLE	OP .	DELETE	2 1 TITLE		Change Addition
NAME	RUSSELL, GARY		2.2 NAME		
STREET ADDRESS	17050 NW 30 AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	OPA LOCKA FL		2. 4 CITY - ST - ZIP		7.7.
TITLE	D DISCORD OF FAM.	☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME	RUSSELL, GLENIN		3 2 NAME		
STREET ADDRESS	RT. 1 BOX 14		3 3 STREET ADDRESS		
CITY - ST - ZIP	LYONS GA		3.4. CITY-ST-ZIP		
TITLE	DS COMPANY	DELETE	4.1 TITLE		Change Addition
NAME	O'BRIEN, JOYCE		4. 2 NAME		
STREET ADDRESS	1551 SW 129 WAY		4.3 STREET ADDRESS		
CITY - ST - ZIP	DAVIE FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP	N		5.4 CITY-ST-ZIP		
TUTE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby o	ertify that the information supplied	with this filing done not qualify to		Section 119 07/3Vi) Florida Statutes I further	portify that the information

1a. I nereby certify that the information supplied with this filling doos not qualify for the exemption stated in Section 119.07(3)(i), 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

ausel

GARY

RussEll

4-21-96 205 7

305 332 7490

CR2E034 (10/9)