## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE: .

## Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # P01000035624 1. Entity Name RUSŠAKIS FARMS, INC. Principal Place of Business Mailing Address 8801 INDRIO ROAD 8801 INDRIO ROAD FORT PIERCE, FL 34951 FORT PIERCE, FL 34951 US US CR2E034 (10/03) 02092005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0028538 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RUSSAKIS, JIM G DO NOT WRITE 8801 INDRIO ROAD FORT PIERCE, FL 34951 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. THUE NAME RUSSAKIS, JIM G 100000304104 STREET ADDRESS 8801 INDRIO ROAD 04/14/05-80029-016 150.0**0** CITY-ST-ZIP FORT PIERCE, FL 34951 ST TITLE RUSSAKIS, NICHOLAS J STREET ADDRESS 8801 INDRIO ROAD FORT PIERCE, FL 34951 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIFLE NAME SYREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

AIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Ph

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 inclicated 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.