

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90314 019 ***150.00

50024882



DOCUMENT # P04000008386 1. Entity Name RUSSO BUILDERS INC.			
Principal Place of Business 9674 NW 10TH AVE #730 MIAMI, FL 33150		Mailing Address 9674 NW 10TH AVE #730 MIAMI, FL 33150	
2. Principal Place of Business 3255 NE 184th STREET Suite, Apt. #, etc. APT. #12503 City & State AVENTURA, FLORIDA Zip 33160-4992		3. Mailing Address 3255 NE 184th STREET Suite, Apt. #, etc. APT. #12503 City & State AVENTURA, FLORIDA Zip 33160-4992	
4. FEI Number #20-1390935		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		03072005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent CABEZAS, ENRIQUE A 9674 NW 10TH AVE #730 MIAMI, FL 33150		7. Name and Address of New Registered Agent Name RUSSO, ALFREDO Street Address (P.O. Box Number is Not Acceptable) 3255 NE 184th STREET APT. #12503 City AVENTURA FL Zip Code 33160	
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: ALFREDO RUSSO 03/07/2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Delete RUSSO, ALFREDO 9674 NW 10TH AVE #730 MIAMI, FL 33150	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition RUSSO, ALFREDO 3255 NE 184th STREET APT. #12503 AVENTURA, FLORIDA 33160-4992
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete DI SANTO, FELICETTA 9674 NW 10TH AVE #730 MIAMI, FL 33150	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DI SANTO, FELICETTA 3255 NE 184th STREET APT. 12503 AVENTURA, FLORIDA 33160-4992
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete CABEZAS, ENRIQUE A 9674 NW 10TH AVE #730 MIAMI, FL 33150	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: ALFREDO RUSSO <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		President 03/07/05 (305)303-9057 <small>Date Daytime Phone #</small>	