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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P93000009292 (2)

ROYAL RUSSIAN SOCIAL CLUB, INC.

Principal Place of Business Mailing Address 250 174TH ST 250 174TH ST #1512 DO NOT WRITE IN THIS SPACE N MIAMI FL 33160 N MIAMI FL 33160 3. Date Incorporated or Qualified 02/08/1993 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 21 26 65-0395173 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes Vi No Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RESSLER, BARRY 3191 CORAL WAY Street Address (P.O. Box Number is Not Acceptable) SUITE 406 83 **MIAMI FL 33145** 84 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiorida 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change PSTD Addition TITLE 1.1 TITLE BARS, WALTER NAME 1.2 NAME 250 174TH ST #1512 STREET ADDRESS 1.3 STREET ADDRESS N MIAMI FL 33160 CITY-ST-ZIP 1.4 CITY-SY-ZIP DELETE Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-7IP 3.4 City-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 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 anticiment with an address. MAR 0 8 1900

SIGNATURE: 60 /

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FILED

Mar 20 1998 8:00am

Secretary of State

305-937-2697