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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

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Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90031 003 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000076668

1. Corporation Name

RUSSAND, INC.

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Principal Place of Business Mailing Address					- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	ant leafa Billa All	18 01101 1011 1001
7200 RADICE CT 7200 RADICE CT							
LAUDERHILL FL 33319 LAUDERHILL FL 33319							
	•				DO NOT WRITE IN T	HIS SPACE	
	•				3. Date Incorporated or Qualifed		
Principal Place of Business 2a. Mailing Address					11/04/1993 4. FEI Number		
21	Tidoo of Basilless	26 26				⊢	pplied For
Suite, Ap	ot. #. etc.	Suite, Apt. #, etc.			65-0446170		lot Applicable
22		27			5. Certifcate of Status Desired		Additional Required
City & St	āte	City & State			C Floring Company Figure 1		
23	·	28		-	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip .	Country	Zip	Coun	itry			to rees
24	25	29	30	· ,	 This corporation owes the current year Personal Property Tax. 	Tintangible ☐ Yes	≱ No
<u></u>	9. Name and Address of Currel		100		10. Name and Address of New Register		J 3110
	\$17 (mg) (ms jan jan	Add Carlo		81 Name	The state of the s		
	ISSMAN, HAROLD ESQ	,	ļ.				
1776 PINE ISLAND RD			,	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
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PL	ANTATION FL 33322	•		<u> </u>			
				84 City	े प्रिकारकार एक स्थानिकार की एक्सिका स्थापन के	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered A	gent signature require	red when reinstating) DATE		· ·
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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 attachment with an address, with all other like empowered.