

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000058646 (8)**

1. Corporation Name

USRUSS INTERNATIONAL COMMERCE, INC.

Principal Place of Business

7904 MIRAMAR BLVD.
MIRAMAR FL 33023

Mailing Address

7904 MIRAMAR BLVD.
MIRAMAR FL 33023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/08/1994

3a. Date of Last Report

2. Principal Place of Business

21

2b. Mailing Address

26

4. FEI Number

95-4468794

Applied For

Not Applicable

Suite, Apt. #, etc

22

Suite, Apt. #, etc

27

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

24

County

25

Zip

29

County

30

8. This corporation has liability for franchise fees under § 199.002,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**SCHEKER, CARLOS D
7904 MIRAMAR BLVD.
MIRAMAR FL 33023**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0702 and 607.1508, Florida 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 607.0706, Florida Statutes.

SIGNATURE

Applicant (agent, registered agent, registered agent and/or filer) (Page 4 of 4)

Registered Agent (agent, registered agent and/or filer)

12

12. OFFICERS AND DIRECTORS	
OFFICE	DPT
NAME	SCHEKER, CARLOS D
STREET ADDRESS	7904 MIRAMAR BLVD.
CITY & ZIP	MIRAMAR FL 33023
OFFICE	DV
NAME	SCHEKER, MARINA
STREET ADDRESS	7904 MIRAMAR BLVD.
CITY & ZIP	MIRAMAR FL 33023
OFFICE	
NAME	
STREET ADDRESS	
CITY & ZIP	
OFFICE	
NAME	
STREET ADDRESS	
CITY & ZIP	
OFFICE	
NAME	
STREET ADDRESS	
CITY & ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
14 OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15 NAME	
16 STREET ADDRESS	
17 CITY & ZIP	
21 OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY & ZIP	
31 OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY & ZIP	
41 OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY & ZIP	
51 OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY & ZIP	
61 OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY & ZIP	

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct 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 person or person 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 attached form, if an addressee.

SIGNATURE: *Carlos D. Scheker*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-966-4403
Feb-28-95-818-360-1696
Toll Free 1-800-360-1696