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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT #	P950000)167	14	(4)
Cornoration Name				•

1. Corporation Name P93000016714 (4)												
RUSSI	an Bear	CAFE, IN	C.						() () () () () () () () () ()			
Daving Blace of Rusiness					Mailing Address							
Principal Place of Business 4330 N. MICHIGAN AVENUE MIAMI BEACH FL 33140			4330 N. MICHIGAN AVENUE MIAMI BEACH FL 33140									
									3. Date Incorporated or Qualified 02/24/1995	3a. Date	of Last F	•
2. Principal Place of Business			2a. Mairing Address					4. FEI Number			Applied For	
1 933 LINCOLLY ROAD			26				65-0561917			Not Applicable		
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.			5. Certificate of Status Desired		•	5 Additional Required		
City & State		ACH, F	zuĄ.	28	City & State		•		Election Campaign Financing Trust Fund Contribution			00 May Be and to Fees
^{∠ip} 4 33139	Zip Country 4 33139 25 U.S.A.		29	Zip	30 Cc	Country 30			∷ [] No		199.032,	
	9. Name	and Address	s of Current	Regi	stered Agent		81	Name	10, Name and Address of New I	legistered /	Agent	
HKES&F	REGISTER	ED AGENT	CORP.						ess (P.O. Box Number is Not Acceptal	.(6)		
	BAYSHOR						82	Street Addr	ess (m.o., box number is not Acceptal	ж.,		
SUITE 600					83							
MIAMI F	L 33133						84	City		FL	8 5 Z	ip Code
11. Pursuant t or register	to the provision	ons of Section both, in the S	s 607.0502 tate of Florid	and 60 a. Suc	07.1508, Florida 8 ∍i change was au	Statutes, the ab	 1-870 	l named corpor oration's boar	ation submits this statement for the purid of directors. I hereby accept the app		_L _L nging its registered	registered office d agent. I am
	th, and accep	ot the obligatio	ons of, Section	on 607	1.0505, řilorida St	atut e s.						
	Signature, typed o	s proteci na -c et r						nt signature require		DÄTE		
12. TITLE	_ n	OFI	ICERS AND	DIREC	CTORS	13.	TITLE	T	ADDITIONS/CHANGES TO OFF		DIRECTO	DRS IN 12
NAME.	SER, DA	VID			[] PECET		NAME			L	j Crimingo	
STREET ADDRESS		MICHIGAN	AVENUE					ADDRESS				
CITY-ST-ZIP	MIAMI B	EACH FL 3	3140			1.4	CHY-S	ST - ZIP				
TITLE				,	[] DELETE	2.1	TITLE				Change	Addition
NAME						2.2	NAME					
STREET ADDRESS								ADDRESS				
CITY-S1-7P TOLE					[] DELETE		CHTY - S THILE	T-21P			7 Change	Addition
NAME NAME					C''l britin	1	NAME	ţ		Ļ.	_ onwigo	LJ ANGROOM
STREET ADDRESS								T ADDRESS				
CITY - ST - ZIP						3.4	CITY-S	ST- ZIP				
INTE				/	DELETI	4 1	TITLE			Ξ	Charige	☐ Addition
NAME						4.21	NAME					
STREET ADDRESS						4.3 3	STREET	ADDRESS				
CITY-\$1-7:2							CITY-S	I-ZIP				
TILLE					DELETE		TITLE] Change	Addition
NAME							VAME					
STREET ADDRESS								ADDRESS				
CNY-51-7P					DELF16		OHY-S	37-21P			1 Casana	Addition
TIFLE					ר"ו הכרנונ		TITLE			L	Change	T vacation
NAME enocci ammores							NAME STREET	VOLUBE Co.				
STREET ADDRESS								ADDRESS				
City-St-Zir	.L					041	IIY-S	H-CIF				

14. For the report of the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify that I am an officer or clirector 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 13 (I changed, or on an attachment with an address.

SIGNATURE:

4/26/96 305.532-3222