

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

FILED
Sep 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000054333
1. Corporation Name

RUSSI OF AMERICA, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/26/1996

4. FEI Number

65-0677453

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30 ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

444 Brickell Ave.
Suite 750
Miami, FL 33131

444 Brickell Ave.
Suite 750
Miami, FL 33131

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

24. Country

28. Zip

29. Country

9. Name and Address of Current Registered Agent

CARLOS A. MOLINA
444 Brickell Ave., Ste 750
Miami, FL 33131

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 of this corporation, with and without the obligation of Section 607.0505, Florida Statutes.

SIGNATURE

Carlos Molina

DATE

DATE

12. OFFICERS AND DIRECTORS

P
NAME
RUSSI EDMILSON H
444 Brickell Ave. Suite 750
Miami, FL 33131

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. NAME

2. STREET ADDRESS

3. CITY, ST, ZIP

4. NAME

5. STREET ADDRESS

6. CITY, ST, ZIP

7. NAME

8. STREET ADDRESS

9. CITY, ST, ZIP

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. NAME

14. STREET ADDRESS

15. CITY, ST, ZIP

16. NAME

17. STREET ADDRESS

18. CITY, ST, ZIP

19. NAME

20. STREET ADDRESS

21. CITY, ST, ZIP

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

500002642885
-09/18/98--01019--016
***150.00

14. I, the undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the information required by Chapter 607, Florida Statutes, and that I am an officer or director of the corporation named herein.

SIGNATURE:

Russi Edmilson

SIGNATURE AND TYPED OR PRINTED NAME OF SERVING OFFICER OR DIRECTOR

Russi Edmilson

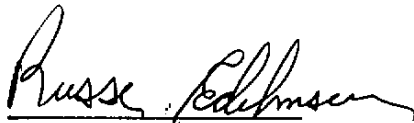
2

Division of Corporations
P.O. BOX 6327
Tallahassee, Fl 32314

Per instructions from Division Of Corporations, I am attaching a check in the amount of \$150.00 for the annual report fee with my application.

I also state that I have not received any notice from the Division Of Corporations in respect with my corporation **RUSSI OF AMERICA, INC.**

Thank you for your courtesy in this matter.



RUSSI EDMILSON H.
President