SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).
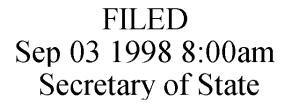
PROFIT CORPORATION ANNUAL REPORT 1998

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

FILED
Sep 03 1998 8:00am
Secretary of State

DOCUMENT # P97000107290 (3)

1. Corporation Name

RONRUSS CORPORATION

Principal Place of Business

999 WASHINGTON AVENUE
MIAMI BEACH FL 33139-5012

Mailing Address

999 WASHINGTON AVENUE
MIAMI BEACH FL 33139-5012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/23/1997

2. Principal Place of Business [21]	2a. Mailing Address [26]	4. FEI Number 65-0809946 — 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] — Country [25]	Zip [29] — Country [30]	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

RUBIN, CHARLES
TESHER CHAVES RUBIN FORMAN & MULLER, P.A.
9100 S. DADELAND BLVD., SUITE 1707
MIAMI FL 33156

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 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE — NAME — STREET ADDRESS — CITY-ST-ZIP ☐ DELETE	1.1 TITLE M 1.2 NAME RUSSELL W. GALBUT 1.3 STREET ADDRESS 999 Washington Avenue 1.4 CITY-ST-ZIP Miami Beach, Florida 33139 — ☐ Change ☑ Addition
TITLE — NAME — STREET ADDRESS — CITY-ST-ZIP ☐ DELETE	2.1 TITLE — 2.2 NAME — 2.3 STREET ADDRESS — 2.4 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE — NAME — STREET ADDRESS — CITY-ST-ZIP ☐ DELETE	3.1 TITLE — 3.2 NAME — 3.3 STREET ADDRESS — 3.4 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE — NAME — STREET ADDRESS — CITY-ST-ZIP ☐ DELETE	4.1 TITLE — 4.2 NAME — 4.3 STREET ADDRESS — 4.4 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE — NAME — STREET ADDRESS — CITY-ST-ZIP ☐ DELETE	5.1 TITLE — 5.2 NAME — 5.3 STREET ADDRESS — 5.4 CITY-ST-ZIP — ☐ Change ☐ Addition
TITLE — NAME — STREET ADDRESS — CITY-ST-ZIP ☐ DELETE	6.1 TITLE — 6.2 NAME — 6.3 STREET ADDRESS — 6.4 CITY-ST-ZIP — ☐ Change ☐ Addition

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.

SIGNATURE: _____

CR2E034 (5/98)