2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P98000005674** Jan 18, 2000 8:00 am **Secretary of State** RUSSO ELECTRIC INC. 01-18-2000 90180 041 ***150.00 Principal Place of Business Mailing Address 6747 WESTVIEW DRIVE 6747 WESTVIEW DRIVE LANTANA FL 33462-3955 LANTANA FL 33462 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0806323 Not Applicable Country \$8.75 Additional Country -5. Certificate of Statūs Desired 🔭 🔲 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUSSO, DONALD Street Address (P.O. Box Number is Not Acceptable) 6747 WESTVIEW DRIVE LANTANA FL 33462 Zin Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NQTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE ☐ Change ☐ Addition ☐ Delete TITLE RUSSO, DONALD NAME NAME STREET ADDRESS 6747 WESTVIEW DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Addition ☐ Change ☐ Delete TITLE RUSSO, PHIL NAME NAME STREET ADDRESS STREET ADDRESS 1064 BROWAN ROAD CITY-ST-7IP~~ CITY-ST-ZIP LANTANA FL 33462 -☐ Change ☐ Addition ☐ Delete TITLE RUSSO, DONALD NAME NAME STREET ADDRESS 6747 WESTVIEW DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Addition Change ☐ Delete TITLE RUSSO, PHIL NAME NAME STREET ADDRESS STREET ADDRESS 1064 BROWN ROAD CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Change □ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Defete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attappment with an address, with all other like empowered.

SIGNATURE: W

CONTROL AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1-10-00

561 642-3390

Daytime Phone 4