

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V32371

(9)

1. Corporation Name

RADRUSS CORPORATION



Principal Place of Business

402 CLAY AVE E
BRANDON FL 33510
US

Mailing Address

402 CLAY AVENUE E.
BRANDON FL 33510
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/29/1992

3a. Date of Last Report

04/19/1995

4. FEI Number

65-0317069

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 has liability for intangible tax under s. 199.032
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

RUSSELL, VERGINA G.
402 CLAY AVE. E.
BRANDON FL 33510

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 607.0500 and 607.1500, Florida Statutes, for 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, Sections 607.0500, Florida Statutes.

SIGNATURE

Virginia S. Russell

4/25/96

12. OFFICERS AND DIRECTORS

TITLE	P	☐	DELETE
NAME	RUSSELL, VERGINA G.		
STREET ADDRESS	402 CLAY AVENUE, E.		
CITY- ST- ZIP	BRANDON FL 33510		
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
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NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE		☐	DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			

13.

1. TITLE	☐	Change	☐	Addition
2. NAME				
3. STREET ADDRESS				
4. CITY- ST- ZIP				
5. TITLE	☐	Change	☐	Addition
6. NAME				
7. STREET ADDRESS				
8. CITY- ST- ZIP				
9. TITLE	☐	Change	☐	Addition
10. NAME				
11. STREET ADDRESS				
12. CITY- ST- ZIP				
13. TITLE	☐	Change	☐	Addition
14. NAME				
15. STREET ADDRESS				
16. CITY- ST- ZIP				
17. TITLE	☐	Change	☐	Addition
18. NAME				
19. STREET ADDRESS				
20. CITY- ST- ZIP				

14. I do hereby certify that the information supplied within this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b) Florida Statutes. I further certify that the information included 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 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 attachment with an address.

SIGNATURE:

Virginia S. Russell

VERGINA G. RUSSELL

4/25/96 (941) 425-6200

CR2E034 (12/95)