

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

FILED

**Apr 16 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 243079 (1)
 1. Corporation Name
ROOSEVELT HOUSE, INC.



Principal Place of Business 945 MERIDIAN AVENUE MIAMI BEACH FL 33139	Mailing Address 945 MERIDIAN AVENUE, #14 MIAMI BEACH FL 33139-8425
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3. Date Incorporated or Qualified 12/22/1960	3a. Date of Last Report 01/24/1996
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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	4. FEI Number 59-165111 Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent MAHECHA, ROSANA V. 945 MERIDIAN AVE #7 MIAMI BEACH FL 33139		10. Name and Address of New Registered Agent 81 Name CHARLES PROUTY 82 Street Address (P.O. Box Number is Not Acceptable) 945 MERIDIAN AVE, #14 83 84 City MIAMI BEACH FL 85 Zip Code 33139	
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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: *Charles L Prouty, Pres.* DATE: **1-12-97**
Signature typed or printed name of registered agent and title applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE TO	<input checked="" type="checkbox"/> DELETE	11 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DOMEDION, ALBERT H.		12 NAME PROUTY, CHARLES	
STREET ADDRESS 945 MERIDIAN AVENUE #8		1.3 STREET ADDRESS 945 MERIDIAN AVE. #14	
CITY-ST-ZIP MIAMI BEACH FL		1.4 CITY-ST-ZIP MIAMI BEACH FL 33139	
TITLE S	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HORNE, JERRY		2.2 NAME	
STREET ADDRESS 945 MERIDIAN AVENUE #14		2.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI BEACH FL		2.4 CITY-ST-ZIP	
TITLE PD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MAHECHA, ROSANA V.		3.2 NAME CHARLES PROUTY	
STREET ADDRESS 945 MERIDIAN AVE #7		3.3 STREET ADDRESS 945 MERIDIAN AVE, #14	
CITY-ST-ZIP MIAMI BEACH FL		3.4 CITY-ST-ZIP MIAMI BEACH, FL 33139	
TITLE VD	<input checked="" type="checkbox"/> DELETE	4.1 TITLE VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PROUTY, CHARLES		4.2 NAME JERRY HORNE	
STREET ADDRESS 945 MERIDIAN AVENUE, #1		4.3 STREET ADDRESS SAME, #14	
CITY-ST-ZIP MIAMI BEACH FL		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: *Charles L Prouty, Pres.* DATE: **1-12-97** (305) 665-5661
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)