

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 329375</b> 1. Entity Name <b>ROMA AIR CORPORATION</b>	
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Principal Place of Business <b>105 AIRPORT ROAD BELLE GLADE FL 33430</b>	Mailing Address <b>PO BOX 454 BELLE GLADE FL 33430</b>
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2. Principal Place of Business	3. Mailing Address	4. FEI Number <b>59-1304789</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applied
City & State	City & State	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required
Zip	Country	Zip

1st MOORE CR2E034 (10/05)

**6. Name and Address of Current Registered Agent**

**DUBOIS, SILVIA  
P.O. BOX 427  
105 AIRPORT ROAD  
BELLE GLADE FL 33430**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when restate)g)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing **\$5.00** May  
 Trust Fund Contribution.  Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete RODRIGUEZ, FRANCISCO P.O. BOX 454,NA BELLE GLADE FL
TITLE	VPD <input type="checkbox"/> Delete RODRIGUEZ, PABLO PO BOX 454 BELLE GLADE FL 33430
TITLE	STD <input type="checkbox"/> Delete DUBOIS, SILVIA R PO BOX 427 BELLE GLADE FL 33430
TITLE	D <input type="checkbox"/> Delete RODRIGUEZ, ROBERTO 4560 SOUTH SHORE WEST PALM BEACH FL
TITLE	D <input type="checkbox"/> Delete RODRIGUEZ, ADRIAN 4560 SOUTH SHORE WEST PALM BEACH FL
TITLE	D <input type="checkbox"/> Delete RODRIGREZ, CARLOS 4560 SOUTH SHORE WEST PALM BEACH FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Silvia R Dubois **Silvia R Dubois** 3-6-06 561996