


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2005 08:00 AM
Secretary of State

DOCUMENT # 345426 1. Entity Name ROMA SERVICES, INC.	
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Principal Place of Business AIRPORT ROAD P.O. BOX 427 BELLE GLADE FL 33430-0427	Mailing Address AIRPORT ROAD P.O. BOX 427 BELLE GLADE FL 33430-0427
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1st MOORE CR2E034 (10/04)

2. Principal Place of Business Suite, Apt. #, etc	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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4. FEI Number 59-1271068	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DUBOIS, SILVIA R 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
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>
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FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete RODRIGUEZ, FRANCISCO P.O. BOX 454, NA BELLE GLADE FL
TITLE	STD <input type="checkbox"/> Delete DUBOIS, SILVIA R 11633 WHITE MARSH DR. WELLINGTON FL 33414
TITLE	VD <input type="checkbox"/> Delete RODRIGUEZ, PABLO P.O. BOX 454, NA 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 RODRIGUEZ, 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"/> Addition U00000234479 02/18/05-80022-012 150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: 2-15-05	Daytime Phone #: 561-996510
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