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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMEI 1. Corporation Name ROSDAY, (99	(6)			<u> </u>		E E
Principal Place of Bus	segnie	Mai	ling Address					
% DAISY M. DOVAL 4230 SW 94TH AVENUE MIAMI FL 33165		9	% DAISY M. DOVAL 4230 SW 94TH AVENUE MIAMI FL 33165			3. Date Incorporated or Qualified		
2. Principal Place of	Business	2a.	Mailing Address			4. FEI Number		Applied For
1		26				65-0128601		Not Applicable
Suite, Apt. #, etc.			Suite, Apl. #, etc.			5. Certificate of Status Desired	7	.75 Additional ee Required
2 27 City & State			City & State			6. Election Campaign Financing		.00 May Be
3 28			,			Trust Fund Contribution		ided to Fees
<i>Z</i> ip 4	p Country 25 29		Zip Gountry 30			: ⊵ No		
	Name and Address of Curre		ered Agent	·	TOTOT	10. Name and Address of New I	Registered Agent	
				81	Name			<u> </u>
DOVAL, DAISY M. 4230 SW 94TH AVENUE MIAMI FL 33165 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute or registered agent, or both, in the State of Florida Such change was authorize			82 Street /		Address (P.O. Box Number is Not Acceptal	ole)		
				83				
						.,,	lor l	7m Codo
			84	′		FL 85	Zip Code	
12.	re, typed or printed name of registered age OFFICERS A	** - * * - *		11 Hagistereri Age	nt signature re	opinetistation to the ADDITIONS/CHANGES TO OF	CMYE FICERS AND DIRE	
	PTS DOVAL, DAISY M.				İ			.go 🔲 110511151
				B	T ADDRESS			
I	NAMI FL.			1.4 CITY-	ST-ZIP			
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NAME				2 2 NAME	LABORISE			
STREET ADDRESS				2.3 STREE	1 ADDRESS			
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STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE	5 4 CITY- 6 1 TITLE 6 2 NAME	ST-ZIP T ADDRESS		Cha	nge 🗌 Addition

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:

2/14/96 (305)227-2273