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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000036928

1. Corporation Name

ROMFEL MAR PROPERTIES, INC.

Principal Place of Business						
C/O SHELCON EVANS, P.A.						
6175 NW 153RD STREET STE 215						
MIAMI LAKES FL 33014						

Mailing Address

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90041 048 ***150.00



6175 NW 153RD STREET STE 215		6175 NW 153RD STREET STE 215		İ		
MIAMI LAKES F		MIAMI LAKES FL 33014		DO NOT WRITE IN THIS SPACE		
				3. Date I-corporated or Qualifed		
				04/25/1996		
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 6175 N.W. 153rd St.		26 6175 N.W. 153rd St.			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 Suite 312		27 Suite 312				
City & State				6. Election Campaign Financing	\$5.00 May Be Added to Fees	
23 Miami Lakes, FL Zip Country		28 Miami Lakes, FL Zip Country		Trust Fund Contribution		
		h''		8. This corporation owes the current year Intangible Personal Property Tax. Yes XNo		
<u>24 33()1</u>	4 25 US 9. Name and Address of Current		<u> </u>	10. Name and Address of New Registers d Age		
	9. Name and Address of Current	Registered Agent	81 Name	10. Hall and reasons of the stage		
SHEL	DON EVANS, P.A.			Sheldon Evans, P.A.		
	NW 153RD STREET		82 Street A	dress (P.O. Bo) Number is Not Acceptable) 6175 N.W. 153rd Street		
SUITE 215						
MIAM	11 LAKES FL 33014		h	Suite 312	rs Zin Codo	
			84 City	Miami Lakes, FL^{\dagger}	35 Zio C. de 33014	
11. Pursuant 1	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named co	rporation submits this statement for the purpose of cha	anging its registered	
office (or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of clirectors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATUFE	Signature, typed or printed na ne of registered agent	and title if applicable. (NOT E: R	egistered Agent signature req	ured when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	PD	☐ ØELETE	1.1 TITLE	PD	Change	
NAME	ROMANO, MARCOS		1.2 NAME	Romano, Marcos		
STREET ADDRESS	6175 NW 153RD ST STE 215		1.3 STREET ADDRESS	6175 N.W. 153rd St, Ste	. 312	
CITY-ST-ZIP	MIAMI LAKES FL 33014		1.4 CITY-ST-ZIP	Miami Lakes, FL 33014		
TITLE	VSD	☐ DELETE	2.1 TITLE	VSD	Change Addition	
NAME	ROMANO, JACQUELINE		2.2 NAME	Romano, Jacqueline		
STREET ADDRE 3S	6175 NW 153RD ST STE 215		2.3 STREET ADDRESS	6175 N.W. 153rd St., St	.e. 312	
CITY-ST-ZIP	MIAMI LAKES FL 33014		2. 4 CITY-ST-ZIP	Miami Lakes, FL 33014		
TITLE		☐ DELETE	3.1 TITLE] Change	
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			34 CITY-ST-ZIP			
TITLE		☐ DELETE	4 1 TITLE		Change	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			62 NAME			
STREET ADDRES S			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14 Lhoroby o	artifuthat the information supplied with	this filing does not qualify to the	he exemption stated i	in Section 119.07(3)(i), Florida Statutes. I further certify	that the information	

indicated on this annual report or supplied who are interesting over no exemption stated in Section 119.07(3)(f), Florida Statutes, Flurtner 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 uniter 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 1.2 or Block 13 if chapter or on an attachine truth an address, with all other like empowered.

SIGNATURE:

SIGNATU RE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #