

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 345426

Entity Name: ROMA SERVICES, INC.

Current Principal Place of Business:

105 GATOR BLVD.
BELLE GLADE, FL 33430-0427

Current Mailing Address:

POST OFFICE BOX 427
BELLE GLADE, FL 33430-0427

FEI Number: 59-1271068

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUBOIS, SILVIA R
105 GATOR ROAD
BELLE GLADE, FL 33430 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name RODRIGUEZ, FRANCISCO
Address P.O. BOX 454
City-State-Zip: BELLE GLADE FL 33430

Title STD
Name DUBOIS, SILVIA R
Address 11633 WHITE MARSH DR.
City-State-Zip: WELLINGTON FL 33414

Title VPD
Name RODRIGUEZ, PABLO
Address P.O. BOX 454
City-State-Zip: BELLE GLADE FL 33430

Title VPD
Name RODRIGUEZ, ROBERTO
Address 4560 SOUTH SHORE
City-State-Zip: WEST PALM BEACH FL 33414

Title VPD
Name RODRIGUEZ, ADRIAN
Address 4560 SOUTH SHORE
City-State-Zip: WEST PALM BEACH FL 33414

Title VPD
Name RODRIGUEZ, CARLOS
Address 4560 SOUTH SHORE
City-State-Zip: WEST PALM BEACH FL 33414

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SILVIA R DUBOIS

SEC./TREAS.

02/14/2013

Electronic Signature of Signing Officer/Director Detail

Date