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

315657

(7)

| DOCUMENT 1. Corporation Name | # | 315657 |
|---------------------------------|------|-------------|
| ROCO COMMI | FRCE | CORPORATION |

| ROCO COMMERCE CORPORATION | | | | | | | | | |
|--|---|---------------------------------|--------------------------------|--|---|--|--|---------------|------------------------------|
| Principal Place | of Business | Ma'ling | Address | | | - | 1144 1316 1 61011 1 3101 | . 61911 VIVII | |
| 651 PALM C | DRIVE ER-661 PALM DR. | C/I | 1 PALM DRIVE O WERNER-661 I | | | | | | |
| SATELLITE BEACH FL 32937 SATELLITE BEACH FL 3293 | | FL 32937 | | 3. Date Incorporated or Qualified 3a. Date of La 04/11/1967 04/1 | | /17/19 | ast Report 17/1995 | | |
| 2. Principal Pla | ice of Business | 2a. Ma 26 | iling Address | | | 4. FEI Number 59-1211357 | | | pplied For lot Applicable |
| Suite, Apt. # | ŧ, etc. | 27 27 | ite, Apt. ⊭, etc. | | | 5. Certificate of Status Desired | | | Additional lequired |
| City & State | | | City & State | | Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees | | |
| Zφ | Country 25 | Zφ |) | Countr 30 | У | 8. This corporation has liability for Florida Statutes 2 Yes | intangible tax i | under s | 199.032, |
| 24 | 9. Name and Address of Currer | | ed Agent | | | 10. Name and Address of New I | Registered Ag | ent | |
| · | Q | | | 81 | Name | | | | |
| | ER,HELEN C | | | 8: | 2 Street Add | ress (P.O. Box Number is Not Acceptal | ule) | | |
| | alm drive Lite Beach FL 32937 | | | 8: | 3 | | | | |
| SAIEL | THE DEMONTE ASSAU | | | 84 | 1 City | 44 W T | | 85 Zip | Code |
| | | | | i | 1 1 | ration submits this statement for the pu | FL | i - I | |
| familiar wit | th, and accept the obligations of, Sections as typic to prive transit of registered entering. | tion 607,050 hard the Papple | ale n | es Note Registere LAJ | | | DATE | | |
| 12. | OFFICERS AN | ID DIRECTO | | 13. | · · · · · · · · · · · · · · · · · · · | ADDITIONS/CHANGES TO OF | | | Addition |
| TITLE | POS | | ☐ DELETE | 1 1 T TLI 12 NAMI | | | ب | onang. | |
| NAME | WERNER, HELEN C | | | | E1 ACIDRESS | | | | |
| STREET ADDRESS | 661 PALM DRIVE | ı | | 1.4 City | | | | | |
| CITY - ST - ZIP | SATELLITE BCH, FL 00000 VD | | DELETE | 2 1 HIL | | A A 17 | | Change | Addition |
| TIFLE NAME | WERNER, THOMAS C | | | 2.2 NAM | | | | | |
| STREET ADDRESS | 661 PALM DRIVE | | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | SATELLITE BCH, FL 00000 |) | | 240114 | | | | | |
| TITLE | VD | <u></u> | ☐ DELETÉ | 3 1 TITL | | | | Change | Addition |
| NAME | EARLEY, ANNE | | | 3 2 NAM | f | | | | |
| STREET ADDRESS | 665 PALM DRIVE | | | 33 SIR | EET ADDRESS | | | | |
| CITY - ST - ZIP | SATELLITE BEACH FL | , | , <u></u> | 3 4 CITY | -S1-7IP | | | | Fil paget. |
| TITLE | | | DELETE | 4 1 T:TL | F | | | Change | Addition |
| NAME | | | | 4.2 NAM | | | | | |
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| NAME | | | | 5.2 NAM | | | | | |
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| NAME | | | | 62 NAN | | | | | |
| STREET ADDRESS | | | | | EET ADDRESS | | | | |
| CITY - ST - ZIP | | | | <u> € 4 Cili</u> | -ST-ZIF | for the even often etated in Section 11 | Q OZIGNIKA Elor | ida Statur | tes Lifurther |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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:

UnC Werner
TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR