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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 326169

(0)

ROMALU CORP.

SIGNATURE:

Principal Place of Business Mailing Address											
3631 SW 6 ST 3631 SW 6 ST											
MIAMI FL 33135 MIAMI FL 33135-2						ļ					
						9 Ds	ate Incorporated or Qualified		Date of Last	Danad	
							1/08/1968		/24/1996	neport	
2. Principal Place of Business 2a. Mailing Address							Number			applied For	
21		26				5	9-1708045			lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				- 0	arrana a para a para a	X		Additional	
22		27		···	5. CE	ertificate of Status Desired	1 201		Required		
City & State		City & State			6. Ek	ection Campaign Financing		\$5:00	May Be		
23					Tru	ust Fund Contribution		Added	to Fees		
· · · · · · · · · · · · · · · · · · ·	Country	Zip 1	Count	ry			is corporation has liability for i		_	s. 199.032,	
25 29 29 9, Name and Address of Current Registered Agent			30	[30]			Florida Statutes Yes No 10. Name and Address of New Registered Agent				
						10. 140	IIIIA BUO WOOLDER OF MAN WA	giaterec	Agent		
BEAMUD, FIDELIA 3631 SW 6TH STREET					(VIII)						
MAMI FL 33135			8	82 Street Address (P.O. Box Number is N			Box Number is Not Acceptab	ile)			
MIMMI FL 33133			8	<u>.</u>							
			8	4	City				85 Zip	Code	
11. Pursuant to the provisions	of Sections 607 0502 and	607 1609 Eleride State	ton the ebe	Ţ	named sam	neration s	homita this statement for the	FI	-	184 au -144 au - 1	
office of registeree agent, (or both, in the State of Flor	ida. Such change was	authorized I	ו עכ	the corporati	tion's boar	rd of directors. I hereby accep	ot the ap	or changing pointment a	its registered s registered	
agent ram ramiliar with a	to accept the obligations	of, Section 607.0505, F	lorida Statut	es.				1/97		_	
SIGNATURE Sloveture Terred or prin	ted name of registered agent and til	tetteen w	TE: Registered A	0001	ninnatura sancina	red who rois	(/2)	DATE			
12.	OFFICERS AND DIRE		13.	Secu	asp actors reduite		DITIONS/CHANGES TO OFFIC		ID DIRECTO	RS IN 12	
THILE TD		DELETE	1,1 TITLE			7,01	21110110101111110C0 10 0111C	LINO AI	Change	Addition	
NAME TALAVERA, ROBERTO			1.2 NAMI	1.2 NAME						-	
STREET ADDRESS 12384 SW 10TH LN			1.3 STRE	1.3 STREET ADDRESS							
CITY-SI-ZIP MIAMI, FL 00000			1.4 CITY-	1.4 CITY-ST-ZIP							
TOTLE VO		DELETE	2.1 TITLE						Change	☐ Addition	
NAME DIAZ, HECTOR A.			2.2 NAM!	2.2 NAME							
STREET ADDRESS 12384 SW 10TH LN			2.3 STRE	2.3 STREET ADDRESS							
CITY - ST - ZIP MIAMI, FL 00000			2 4 CITY	2 4 CITY-ST-ZIP							
TITLE DP DELETE			3 1 TITLE						Change	☐ Addition	
NAME TALAVERA, LUIS J.			3.2 NAME	3.2 NAME							
STREET ADDRESS 12384 SW 10TH LN			3 3 STRE	3 3 STREET ADDRESS							
CITY-SI-ZIP MIAMI, FL 00000			3.4. CITY	3.4. CITY-ST-ZIP							
TITLE VD	14010	☐ DELETE	4.1 TITLE						Change	Addition	
NAME TALAVERA, M			4. 2 NAM	E							
STREET ADDRESS 12384 SW 10			4 3 STRE	ET A	DDRESS						
CITY-ST-ZIP MIAM, FL OO	JOU	<u> </u>	4.4 CITY-		ZIP	·····				····	
TITLE VD	en sa	DELETE	5.1 TIFLE						Change	Addition	
NAME BEAMUD, FID			5.2 NAME								
STREET ADDRESS 3631 S.W. 6			5.3 STREE	ET AI	DORESS						
CITY-ST-ZP MIAMI, FL 000		[] berete	5.4 CITY		ZIP						
TITLE SD NAME DIAZ BERTHA	. 44	L.J DELETE	6.1 TITLE						Change	Addition	
40004 0147 40			6.2 NAME								
MARKET OF AN			6.3 STREE								
14. I do hereby certify that the		his filing does not ave	6.4 CITY-	ST-	ZIP	d in Casti-	n 110 07(2Vi) Elasida Osar	اللس الأوا		l tha	
information indicated on thi	s annual report or supplier	neolal annual report is:	True and acc	CHIES	ited bos ets	mv siana	ture shall have the same long	l offo∧t s	e if maria ur	ider anth: that	
I am an officer of director of	f the corporation or the re- ck 13 if/changed, or on an	ceiver or trustee empo	wered to exe	cul	te this report	rt as requi	red by Chapter 607, Florida S	tatutes;	and that my	name	