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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 338417

(9)

1, Corporation ROPE La	AND COMPANY		,								
Principa Plac	e of Business	Mailing Addre	SS				1 100 IO 100				
400 E ATLANTIC BLVD 400 I			O E ATLANTIC BLVD DMPANO BEACH FL 33080-8200								
						1	Date Incorporated or Qualified 12/04/1968		Date of Last Re (01/1996	port	
,	Place of Business		2a. Mailing Address			4.	FEI Number		 	plied For	
Suite, Apt	# oto	26 Suite Ant	Suite, Apt. #, etc.				59-1282564		\$8.75 A	t Applicable	
22	m, etc.	27				5.	Certificate of Status Desired	N.	Fee Re		
City & Sta	te		City & State			6.	Election Campaign Financing \$5.00 May Be				
23		28					Trust Fund Contribution Added to Fees				
Zφ	Country	Z _i p			Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	4 25 g. Name and Address of Currer		29 30 Registered Agent		<u> </u>		10. Name and Address of New Registered Agent				
D/L	PNACK,PAUL A			81	Name						
400 E. ATLANTIC BLVD.				82	Street A	et Address (P.O. Box Number is Not Acceptable)					
	IPANO BCH. FL 33060						JIGGS (F.V. DUX MURBOL IS THAT PACAPAGOTO)				
				. 83							
				84	City			FI	ᆸᆙ	Code	
11. Pursuant office or	to the provisions of Sections 60 registered agent or both, in the ani familiar with, and accept the	7.0502 and 607.1508, FI State of Florida, Such ch obligations of Section 6	orida Statutes lange was au 17 0505, Flori	, the above thorized by da Statutes	e-named the corp	corporation or ation	n submits this statement for the loard of directors. I hereby acc	purpose ept the ap	of changing its pointment as	s registered registered	
SIGNATURE	and detend with the execution	brigado la cit boullon d			-						
GIGITATION	Signature, typical or printed harne of registe		(NOTE:		nt signature	required when		DATE	ID DIRECTOR	0.151.40	
12.		RS AND DIRECTORS	DELETE	13. 1.1 TITLE		<u>_</u>	ADDITIONS/CHANGES TO OFF	ICEHS AN	Change	Addition	
T ILE NAME	D Roepnack, David H	_	DELETE	1.2 NAME							
STREET ADDRESS					1.3 STREET ADDRESS		N.W. 684 AVEN	KE			
CITY - \$1 - 71P	PARKLAND FL			14 City - 9	IT-ZIP	MRK	N.W. 684 AVENI LAND, FLORIDA	3306	7		
111,F	D		DELETE	21 TITLE					Change	Addition	
NAME	ROEPNACK, ROBERT A			22 NAME							
STREET ADDRESS	38 SW 9TH TERR			2 3 STREET ADDRESS							
City-S1-ZiP	BOCA RATON FL			2.4 CITY-ST-ZIP		 			Change	Addition	
NAME	ROEPNACK, PAUL A			3.2 NAME							
STREET ADDRESS	AAA E GALINIG BEAD IIN	IT 316		3.3 STREET	ADDRESS						
CITY - \$1 - 2iP	BOCA RATON FL	•. •		3.4. CITY-							
TITLE	D	☐ DELETE		4.1 TITLE					Change	Addition	
N4ME	BEARD, SANDRA L			4. 2 NAME							
STREET ADDRESS				4.3 STREET							
C114 - S1 - 74P	MELBOURNE BCH, FL 00		DELETE	4.4 CITY - S 5.1 TITLE	ST-ZIP	ļ			Change	Addition	
NAME		L.	DEELIE	5.1 THE					Simile	· Walled	
STREET ACORESS				•	r address						
Citr-S*-7iP				5.4 CITY - S							
THEF			DELETE	6.1 TITLE					Change	Addition	
NAME				6.2 NAME		[
STREET ADORESS				6.3 STREET	ADDRESS						

6.4 CITY - ST- ZIP 14. Ide hereby certily that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report as 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 receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name