

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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95 MAY -1 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Montanari Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 416587	(4)
1. Corporation Name PRODUCTS BY ROBERTS INC	

Principal Office of Corporation 1490 S. DIXIE HWY EAST POMPANO BEACH FL 33060	Mailing Address 1490 S. DIXIE HWY EAST POMPANO BEACH FL 33060
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 01/20/1973	3a. Date of Last Report 05/01/1994
State, Apt. #, etc. 22		State, Apt. #, etc. 27		4. FEI Number 59-1433360	Applied For ☐ Not Applicable
City & State 23		City & State 28		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
City 24		City 29		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
Country 25		Country 30		7. This Corporation has liability to a foreign tax under § 1402(c), Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent PARKHURST, ARTHUR B. 335 CORAL WAY FT. LAUDERDALE FL 33301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME PD POPIEL, ROBERT F. 740 S. FEDERAL HWY 502 POMPANO BEACH FL		1. NAME ☐ Change ☐ Addition	
NAME VP POPIEL, ROBERT F. JR. 181 SW 9TH COURT POMPANO BEACH FL		2. NAME ☐ Change ☐ Addition	
		3. NAME ☐ Change ☐ Addition	
		4. NAME ☐ Change ☐ Addition	
		5. NAME ☐ Change ☐ Addition	
		6. NAME ☐ Change ☐ Addition	
		7. NAME ☐ Change ☐ Addition	
		8. NAME ☐ Change ☐ Addition	
		9. NAME ☐ Change ☐ Addition	
		10. NAME ☐ Change ☐ Addition	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.01, Florida Statutes. I further certify that the information submitted on this filing report is supplemental annual report is true and accurate and that my corporation shall have the same legal effect as if made under oath. I am an officer or director of this corporation or an officer or director of a corporation authorized to receive this report as required by Chapter 607, Florida Statutes, and that my name appears on this filing or that I am a duly authorized agent of the corporation with an address.

SIGNATURE:  **Robert F. Popiel, Sr. 4/28/95 (305) 782-2375**