

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 475436

Entity Name: RO-MIN CORP.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

18515 NE 18 AVE
NORTH MIAMI BEACH, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

1825 N.E. MIAMI GARDENS DRIVE
NORTH MIAMI BEACH, FL 33179 US

New Mailing Address:

FEI Number: 59-1594557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDMAN, ROBERT A
18515 NE 18 AVE
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOLDMAN, ROBERT
Address: 18515 NE 18 AVE
City-St-Zip: NORHT MIAMI BEACH, FL 33179

Title: V () Delete
Name: BLANCO, RICHARD
Address: 18515 NE 18 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: S () Delete
Name: BLANCO, MINDY
Address: 18515 NE 18 AVE
City-St-Zip: NORHT MIAMI BEACH, FL 33179

Title: CEO () Delete
Name: GOLDMAN, MELVIN
Address: 18515 NE 18 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT GOLDMAN

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date