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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 549838



DIVISION OF CORPORATIONS

Mar 22, 1999 8:00 am | Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

03-22-1999 90018 035 ***150.00

1. Corporation Name ROGERS BROS., INC.							
Dringing! Place	of Business	Mailing Address					<u> </u>
Principal Place 21 N.E. 1ST CO	21 N.E. 1ST COURT						
DANIA FL 33004 DANIA FL 33004							
						DO NOT WRITE IN THIS SPACE	
	•	- : -		- · .	٠	3. Date Incorporated or Qualifed :	
Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For
21 26						59-1777434	Not Applicable 5 Additional
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						i = Contiforto of Status Desired	Required
City & State City & State						1	00 May Be
23				Country		1744.1	ed to Fees
Zip	Country Zip		30			8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	
24	9. Name and Address of Curren	11	30			10 Name and Address of New Registered Agent	
		t tradition and a signature		81 Name			
ROGERS, JAMES J. 3280 SEAWARD DRIVE			-	82 Street Address (P.O. Box Number is Not Acceptable)			
POMPANO FL 33062				83			
			-	84 City		201 85 Z	Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute						FL 33 2	its registered
office or re agent. I a	egistered agent, or both, in the State or familiar with, and accept the obligation of the state	of Florida. Such change was au tions of, Section 607.0505, Flor	ithorized ida Statu	by the corp tes.	oration	's board of directors. I hereby accept the appointment as	s registered
12.		D DIRECTORS	13.	90 0.9		ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTORS IN 12
TITLE	PD DELETE		1.1 TITLE		1	☐ Chan	
NAME	ROGERS, JAMES J.		1.2 NA	ME			
STREET ADDRESS	3280 SEAWARD DRIVE		1.3 STF	REET ADDRESS			
CITY-ST-ZIP	POMPANO FL		1.4 CIT	Y-ST-ZIP			
TITLE	VD DELETE		2.1 TIT	2.1 TITLE		Chan	nge
NAME	ROGERS, DAVID A.		2.2 NA	ME	- سے		5 -
STREET ADDRESS	2894 TALL OAK COURT		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	DAVIE FL			Y-ST-ZIP	<u> </u>	S Char	nge
TITLE	STD BOCERS HOWARD	☐ DELETE	3.1 TIT			- Clia	iac Ti vaqviqii
NAME	Rogers, Howard 5531 SW 94TH Ave		3.2 NA		10	DIT DE 18 STEET APT	* +3
STREET ADDRESS	COOPER CITY FL			REET ADORESS TY-ST-ZIP	12	LAUDERDALE FL. 33	305
CITY-ST-ZIP TITLE	COUPER OIL FL	☐ DELETE	3,4, CI 4.1 TIT		7	Char	nge
NAME			4. 2 NA		1	_	-
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	,			Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TIT		1	☐ Char	nge Addition
NAME :			5.2 NA	ME			
STREET ADDRESS	•		5.3 STI	REET ADDRESS			ļ
CITY-ST-ZIP				Y-ST-ZIP	<u> </u>		
TITLE		☐ DELETE	6.1 TIT			☐ Char	nge 📑 Addition
NAME			6.2 NA				
STREET ADDRESS				REET ADDRESS	1		
CITY-ST-ZIP			6.4 CIT	Y-\$T-ŽIP			

14. I hereby certify that the information supplied with this filing 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 or suppliemental 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 adactment with an address, with all other like empowered.

SIGNATURE: