

576821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

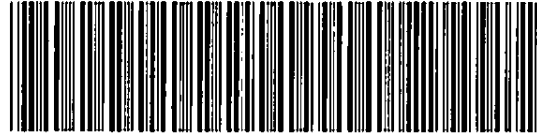
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600460056866

C O R P O R A T I O N F O R P R O F I T

Word Processing: June 26, 1978

By: rr

Updating: *7/27/78*

By: *[Signature]*

A notification letter was mailed to:
Dominick F. Miniaci, Esquire
3101 N. Federal Hwy., Suite 502
Ft. Lauderdale, FL 33306 Addressed to: Mr. Miniaci

Corporation Name: ROZAP, INC.

Filing Date: June 23, 1978

Charter Number: 576821

Capital Stock: 100 shares @ \$1.00

Money acknowledged on letter: \$63.00

576821

FILED

DOMINICK F. MINIACI
ATTORNEY AT LAW
FORT LAUDERDALE, FLORIDA 33306

3101 N. FEDERAL HWY. #102
KENNETH BLDG. - SUITE 902
TELEPHONE 886-4378
TALLAHASSEE, FLORIDA

JUN 23 3 16 PM '78

OF COUNSEL
SAM C. CALIZO
BEN W. GRISBY
WILLIAM C. PURCELL
BENEFIT DONOR
OF NEW JERSEY AND FLORIDA BARS

Secretary of State
Division of Corporations
The Capital
Tallahassee,
Florida 32304

June 6, 1978 - 359 *****
June 6, 1978 - 358 *****
June 6, 1978 - 357 *****

ROZAP, INC

Re: Andromeda, Inc. Articles of Incorporation - 356 *****

Dear Sir,

Enclosed herewith please find original and one copy
above captioned Articles of Incorporation, along
check in the amount of \$63.00 to cover cost of
same and the return of one certified copy.

Thank you for your help in this matter.

Very truly yours

Dominick F. Miniaci
Dominick F. Miniaci C.R.

DFM/cr
Enc.

RECEIVED
JUN 8 10 23 AM '78
DEPARTMENT OF REVENUE
MAIL ROOM
TALLAHASSEE, FLORIDA

SEARCH TAX	
	30.00
	15.00
	15.00
R. A. FEE	3.00
P. COPY	
SEARCH	
TOTAL	63.00
BALANCE DUE	

3,18 *L*

DEPARTMENT OF STATE



Bruce A. Smathers
Secretary of State

David C. MacNamara
Assistant Secretary of State

June 15, 1978

Dominick F. Miniaci, Esq.
3101 N. Federal Hwy, Suite 502
Ft. Lauderdale, FL 33306

Re: ANDROMEDA, INC.

We have received your Articles of Incorporation for ANDROMEDA, INC., and check(s) totaling \$63.00. However, the charter has not been filed and is being returned to you for the following:

In order to use this corporate name, you must obtain written consent from corporation listed on the attached printout. This letter of consent must be signed by one of their corporate officers.

Sincerely,

F. R. Ritter

F. R. Ritter, Director
Division of Corporations

FILED

JUN 21 3 16 PM '78

ALL STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATIONS
The Capitol
Tallahassee, Florida 32304

F. R. Ritter
Director
Division of Corporations

BUREAU OF
UNIFORM COMMERCIAL CODE
AND CORPORATE RECORDS

Among the many improvements underway in the Department of State to better serve the citizens of Florida is an all new telephone system for the Division of Corporations. The numbers listed below take effect January 1, 1978.

Since our switchboard will be eliminated, it will be necessary for you to dial the program area you wish directly. All numbers are area code 904 followed by 488.

Corporate information on the computer will be provided at only one number — (904) 488-9000. To obtain information on how to file, consult the type of filing. General information can be obtained at (904) 488-8130. To find out if a corporate name is available for use call (904) 488-9260. Uniform Commercial Code's number is (904) 488-1010 for general information and (904) 488-9285 for debtor information on the computer.

THESE NUMBERS EFFECTIVE 1-1-78

Subject	(904) 488-
Amendments Domestic	9070
Amendments Foreign	9840
Amendments other - see specific types	
Annual Reports	9280
Articles of Incorporation	
Domestic	9070
Foreign	9840
Certificates Under Seal	
Corporations	9570
UCC	1010
Certified Copies	
Corporations	9570
UCC	1010
Corporate Information	
Corporations	9000
This is the only number that will provide corporate information from the computer including the following: name, registration, officers, directors, date of incorporation, status and principal office address	
Computer Information, UCC	9285
Conference Room	9638
Corporate Information - see Computer Information above	
Corporate Information - No fee and status of filings - see specific types of filings	
Correspondence	8868
Debtor Information, UCC Filings	9285
Declarations of Trust	9840
Dissolution Involuntary	9050
Dissolution Voluntary	9070
Domestic Charters Amendments	9270
Domestic Charters Non-Profit	9270
Foreign Corporations General	9130
Fees - see specific types of filings also	
Fees Uniform Commercial Code	1010
Filing Information General	9170
Filing Information - see specific types of filings	
Financial Statements - (see UCC)	
Fiscal - Returned Checks	9638
Foreign Qualifications Amendments	9840
Foreign Name Registrations	9840
General Information	9130
How to File -	
General Information - see specific types of filings	9130
Uniform Commercial Code	1010
Licensed Partnerships	9840
Licenses Domestic	9070
Licenses Foreign	9840
Microfilm - Order for Duplicates	9575
Microfilm	9575
Name Availability	1010
Name Reservations - how to file	9130
Name Changes Domestic	9070
Name Changes Foreign	9840
Non-Profit Corporations Domestic	9270
Non-Profit Corporations Foreign	9840
Partnerships Division of Corporations	9383
Qualifications Foreign	9840
Restatements	
Domestic and Foreign Charters	9080
Registered Agent	
Domestic and Foreign Filings	9080
Registered Agent	
Change of Registrations?	9570
Service Marks	9840
Service of Process	9570
Systems Analyst	9840
Trademark	9840
Uniform Commercial Code	1010
Voluntary Dissolutions	9070
Withdrawals Foreign	9840

The 1977 Florida Legislature increased the fee for filing the 1978 Annual Report from \$5 to \$10. Please make check or money order in the amount of \$10 payable to SECRETARY OF STATE when filing this year's Annual Report.

DOMINICK F. MINIACI
ATTORNEY AT LAW
FORT LAUDERDALE, FLORIDA 33306

3101 N. FEDERAL HWY.
KENANN BLDG. - SUITE 502
TELEPHONE 566-4378

OF COURSE:
SAM C. CALIENDO
SEN W. GRIGSBY
WILLIAM C. PURCELL
DEREK DON (DRIVER)
OF NEW JERSEY AND FLORIDA BAR

Secretary of State
Division of Corporations
The Capital
Tallahassee, Fla. 32304

June 21, 1978

Re: Rozap, Inc.

Dear Sirs,

The name of Andromeda Inc. on the enclosed corporate papers has been substituted with Rozap, Inc.

I trust this is satisfactory and await the certified copy.

Sincerely

Dominick F. Miniaci
Dominick F. Miniaci *DM*

DFM/cr
Enc.

RECEIVED
JUN 23 9 11 AM '78
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R 24481

FILED
JUN 27 3 15 PM '78
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

ROZAP, INC.

FILED
JUN 23 3 16 PM '78
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of this Corporation is:

ROZAP, INC. 576821

ARTICLE II

The corporation has perpetual existence unless otherwise specified in these Articles.

ARTICLE III

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV

This corporation is authorized to issue 100 shares of common stock with a par value of \$1.00 per share.

ARTICLE V

The street address of the initial registered office of this corporation is 3101 North Federal Highway, Fort Lauderdale, Florida and the name of the initial registered agent of this corporation is DOMINICK F. MINIACI.

ARTICLE VI

This corporation shall have one director initially. The number of directors may be either increased or decreased from time to time by the By-Laws but shall never be less than one (1) nor more than nine (9). The name and address of the initial director of this corporation is as follows:

<u>NAME</u>	<u>ADDRESS</u>
DOMINICK F. MINIACI	3101 North Federal Highway, Fort Lauderdale, Florida 33306

ARTICLE VII

The name and address of the person signing these Articles is as follows:

<u>NAME</u>	<u>ADDRESS</u>
DOMINICK F. MINIACI	3101 North Federal Highway, Fort Lauderdale, Florida 33306

ARTICLE VIII

The power to adopt, alter, amend or repeal by-laws shall be vested in the Board of Directors and Shareholders.

ARTICLE IX

Shares of capital stock of this corporation shall be issued initially to the following person in the amount opposite his name.

<u>NAME</u>	<u>SHARES</u>
DOMINICK F. MINIACI	-100-

ARTICLE X

The approval of the shareholders of this corporation to any plan or merger shall be required in every case, whether or not such approval is required by law.

ARTICLE XI

Members of the Board of Directors may participate in special meetings of the Board of Directors by means of conference telephone as provided by law, but regular meetings of the Board of Directors must be attended in fact in person by each director.


ARTICLE XII

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or amendment thereto, and any right conferred upon the shareholder subject to this reservation.

ARTICLE XIII

This corporation shall indemnify any officer or director or any former officer or director, to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 6 day of June 1977.


DOMINICK F. MINIACI

STATE OF FLORIDA)
COUNTY OF BROWARD) ss.:

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared DOMINICK F. MINIACI, known to me and known by me to be the person who executed the foregoing articles of incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid this 6th day of June 1978

Walter M. Pettit
NOTARY PUBLIC, State of
Florida, at large

My Commission Expires,

In Pursuant of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

That ROZAP, INC. desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation at the City of Fort Lauderdale, Florida, County of Broward, has named DOMINICK F. MINIACI located at 3101 North Federal Highway, Fort Lauderdale, Florida as its agent to accept service of process within this State.

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

Don Miniaci
DOMINICK F. MINIACI

Rozaf, Inc

PRINTOUT SENT

LETTER SENT

CUS SENT

REINSTATEMENT
FILED 7-26-84

INVOLUNTARILY
DISSOLVED 12-5-79

REINSTATEMENT
CUS

15
5

REGISTERED AGENT
OVERPAYMENT

- 72 Privilege Tax
- 73 Annual Report
- 74 Annual Report
- 75 Annual Report
- 76 Annual Report
- 77 Annual Report
- 78 Annual Report
- 79 Annual Report
- 80 Annual Report
- 81 Annual Report
- 82 Annual Report
- 83 Annual Report
- 84 Annual Report

20
20
20
20
20
20
20
20

TOTAL 140
REFUND

006 6685 7/27/84

15.00

005 6685 7/27/84


5.00

FILED
1984 JUL 26 PM 3 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME AVAILABLE _____
REINSTATED BY _____
UPDATER _____
UPDATER VERIFYER _____

576821

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

<p>CORPORATION ANNUAL REPORT</p> <p>1984</p>		<p>FLORIDA DEPARTMENT OF STATE George Firestone Secretary of State DIVISION OF CORPORATIONS</p>	<p>FILED</p> <p>1984 JUL 26 PM 3:36</p>
--	---	---	--

Read Notice and Instructions on Other Side Before Filing
Filing Fee of \$10 Required -- Make Checks Payable to the Treasurer, Florida

<p>1 Name and Address of Corporation Principal Office</p> <p><input type="checkbox"/> 576821 Rozap, Inc. 3101 N Federal Highway Ft. Lauderdale, Fl. 33306</p> <p><input type="checkbox"/></p> <p><small>If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.</small></p>	<p>2 Enter Change of Address of Corporation Principal Office if Different from Above (Do Not Submit)</p> <p>Street Address _____ City _____ State _____</p>
--	---

3 Date Incorporated or Qualified to Do Business in Florida	4 Federal Employer Identification Number (EIN)	5 Date of Last Report
--	--	-----------------------

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1984			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Dominick F. Miniaci	D	3101 N Federal Highway	Ft. Lauderdale, Fl.
Sandra Fortenberry	A/S	502 East Park Ave.	Tall. Fl.

Registered Agent Information	
7 Name and Address of Current Registered Agent	8 Name and Address of New Registered Agent
Dominick F. Miniaci 3101 N Federal Highway Ft. Lauderdale, Fl. 33306	Name _____ Street Address (Do NOT Use P.O. Box Numbers) _____ City, State and Zip Code _____

9 Pursuant to the provisions of Sections 607.034 and 607.035, Florida Statutes, the undersigned Corporation, upon the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____ DATE _____

SIGNATURE _____ Registered Agent Accepting Appointment

\$3.00 additional fee required for Registered Agent changes.

10 See signature restrictions under instructions on reverse side of this form.

I Certify that I am an Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Understand My Signature on This Report Shall have the Same Legal Effects as if Made Under Oath.

Signature: <i>Sandra Fortenberry</i>	Date: <i>7-26-84</i>
Typed Name of Signing Officer: Sandra Fortenberry	Title: Assistant Secretary

11 Should you desire a certificate of status check, the box below and include an additional \$5.00 with your payment.

CERTIFICATE OF STATUS DESIRED **XX**
\$5 Additional fee required for certificate

COR 600 (1-84)

\$140⁰⁰

Need Today

CORPORATION INFORMATION SERVICES, INC.

502 East Park Avenue Tallahassee, FL 32301 (904) 222-9171
MAILING ADDRESS: Post Office Box 10329 Tallahassee, FL 32302
TOLL-FREE IN FLORIDA 1-800-342-8088

ORDER NUMBER	ORDER DATE	CUSTOMER NO.	TR CODE	REFERENCE
36724	7-26-84	450	14	Rozap Mary Jane

DESCRIPTION

Rozap, Inc.

Reinstate and obtain COS

Mailback as per request from Mary Jane

FILED
1984 JUL 26 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME:
Dominick F. Miniaci, Esquire
Attorney at Law
821 East Broward Blvd.
Ft. Lauderdale, Fl. 33301

305-463-8200

TELEPHONE NO.:

Name **CA**
Availability **7-26-84**
Document
Examiner
Date
Time
Verifier
Acknowledgement
W. H. Verifier

576821

FLORIDA DEPARTMENT OF STATE

George Firestone

625 West 17th St.

Ron Levert

625 West 17th St.

Telephone Number 320-9849

576821

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

To the Secretary of State of the State of Florida

Pursuant to the provisions of Sections 607.031 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of FLORIDA, submits the following statement for the purpose of changing its registered office or registered agent or both, in the State of Florida:

FIRST: The name of the corporation is ROZAP, INC.

SECOND: The address of its present registered office is 3101 N. Federal Highway, Ft. Lauderdale, Florida 33306

THIRD: The address to which its registered office is to be changed is 5353 N. Federal Highway, Ft. Lauderdale, FL 33308

FOURTH: The name of its present registered agent is Dominick F. Miniaci

FIFTH: The name of its successor registered agent is Dominick F. Miniaci, P.A., 821 E. Broward Blvd., Ft. Lauderdale, FL 33301

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of directors

Dated July 30, 1984

ROZAP, INC.

Exact corporate name

SIGNATURE

[Signature of President or Vice President]

(President or Vice President)

FILING FEE: \$3.00

DATE 7/30/84

SIGNATURE

[Signature of Registered Agent]

(Registered Agent)

DATE 7/30/84

[Handwritten initials]

FSR 11-83-1-0

FLORIDA - State of the Arts

YOUR DATE ON OR AFTER JANUARY 1, 1984 OR AFTER JULY 1, 1984

CORPORATION
ANNUAL REPORT
1985



ANNOUNCED

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1 Name and Address
 576621 B
 ROZAP, INC.
 5353 A. FED. HWY.
 FT. LAUDERDALE, FL 33308

3 Date Incorporated: 01/23/1976
 07/26/1984

1 ~~MINIACI, DOMINICK F. 3 3101 N. FEDERAL HWY FT. LAUDERDALE, FL~~
 1 Frank J. Galgano VP/D 5353 N. Federal Hwy. Ft. Lauderdale, FL 33308
 2 ~~ROPTENBERG, SAMUELA 473 502 E. PARK AVENUE TALLAHASSEE, FL~~

3
4
5
6

Registered Agent Information

MINIACI, DOMINICK F., P.A.
 501 E. BERNARD BLVD.
 FT. LAUDERDALE, FL 33301

B. Pursuant to the provisions of the Constitution of the State of Florida, the Secretary of State has received the following information regarding the change of the registered agent of the above corporation:

SIGNATURE

\$3.00 additional fee required for Registered Agent changes

10. If the corporation is a foreign corporation, the name of the corporation as it appears on the certificate of incorporation or other document filed with the Secretary of State.

11. Signed Name of Signing Officer: Frank J. Galgano Vice President (305) 771-3222
 Date: 3/15/85

12. Shall you desire a Certificate of Status? XXX
 \$5 additional fee required for a Certificate of Status

DUPLICATE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1986



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE.
FILED
APR 17 11:42
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

<p>1. Name and Address of Corporation Principal Officer.</p> <p>576821 3 ROZAP, INC. 5353 N. FED. HWY. FT. LAUDERDALE, FL 33308</p> <p><small>* Indicate a street name and correct initials, when entering the correct address. * Indicate P.O. Box Number.</small></p>	<p>2. Enter Change of Address of Corporation Principal Officer. P.O. Box Number Alone is NOT Sufficient</p> <p>Street Address 21</p> <p>P.O. Box No. 22</p> <p>City and State 23</p> <p>Zip Code 24</p>
---	---

<p>3. Date Incorporated or Qualified To Do Business in Florida 06/23/1978</p>	<p>4. Federal Employer Identification Number (FEIN)</p>	<p>5. Date of Last Report 03/14/1985</p>
---	---	--

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985				
1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	
GALGANO, FRANK J	V/P/D	5353 N FEDERAL HWY	FT LAUDERDALE, FL	

REGISTERED AGENT INFORMATION

<p>7. Name and Address of Current Registered Agent</p> <p>MINIACI, DOMINICK F., P.A. 821 E. BROWARD BLVD. FT. LAUDERDALE, FL 33301</p>	<p>8. Name and Address of New Registered Agent</p> <p>Name 81</p> <p>Street Address (Do NOT Use P.O. Box Number) 82</p> <p>City and State 83 FL Zip Code 84</p>
--	---

I, Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent or both in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors.

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.025, F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$25.00 additional fee required for Registered Agent changes.

19. I certify that I am an Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I further certify that I understand the Corporation's Report shall have the same legal effect as if I were Under Officer.

<p>Signature</p>	<p>Date</p>
<p>Typed Name Frank J. Galgano</p>	<p>Title President</p>

11. Should you desire a certificate of status check the box CERTIFICATE OF STATUS DESIRED \$5 Additional Fee required for a Certificate of Status

CREC004 (1/85)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION
ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
 George A. Hathorn
 Secretary of State
 DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of \$25 Required. Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

576821
 ROZAP, INC.
 5353 N. FED. HWY.
 FT. LAUDERDALE, FL 33306

2. Change of Address of Principal Office
 (If this change is made, attach a copy of the new address.)

3. Date incorporated in State: 06-23-1978

4. Date of filing: 04-17-1988

5. Name and Street Address of Registered Agent

CALGANO, FRANK J. V.P.O. 5353 N. FEDERAL HWY FT. LAUDERDALE, FL

REGISTERED AGENT INFORMATION

6. Name and Address of Current Registered Agent

MINIACI, DOMINICK F., P.A.
 821 E. BOWARD BLVD.
 FT. LAUDERDALE, FL 33301

7. Name and Address of New Registered Agent

8. Pursuant to the provisions of Chapter 689, Florida Statutes, which require that a corporation incorporated under the laws of the State of Florida submit this statement for the purpose of changing its registered agent, I, the undersigned agent, do hereby certify that such change was authorized by the Board of Directors of the corporation and that I, the undersigned agent, do hereby accept the appointment of the new registered agent of the corporation.

SIGNATURE _____
 (Registered Agent Accepting Appointment)

\$25.00 additional fee required for Registered Agent changes.

9. I certify that I am an Officer of the Corporation, the Board of Directors, or a person authorized to execute this Report as Required by Chapter 689, Florida Statutes, and I understand the significance of this Report and the consequences of the errors and omissions made therein.

Signature:

Typed Name: FRANK J. CALGANO

Title: President

Telephone Number: 771-3222

10. Should you desire a certificate of status for the corporation...

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee required for a Certificate of Status

DO NOT WRITE IN THIS SPACE

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

(DO NOT WRITE IN THIS SPACE)

Filing Fee of \$25 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office

506801
HOTAP, INC.
5353 N. FEDERAL HWY.
PT. LAUDERDALE, FL 33308

2. Enter Complete Address of Corporation Principal Office (NO Box Number Address NOT Subsequent)

Street Address 01
PO Box No 02
City and State 03
Zip Code 04

3. Date of Last Report 02/23/1988

4. Name of Person Who is the Secretary or Treasurer

5. Date of Last Report 02/19/1987

6. Name and Address of Person Who is the Registered Agent

GALIANO, FRANK J. V/P/O 5353 N FEDERAL HWY PT LAUDERDALE, FL

REGISTERED AGENT INFORMATION

MONTAGI, DOMINIC E., P.A.
801 E. BROWARD BLVD.
PT. LAUDERDALE, FL 33301

7. Name and Address of Person Registered Agent

Street Address 1 Do NOT use PO Box Number 01
Street Address 2 Do NOT use PO Box Number 02
City and State 03
Zip Code 04

FL

I, the undersigned, being a resident of the State of Florida, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

Signature of Officer or Director

DATE

8. Signature of Secretary or Treasurer

9. Signature of Registered Agent

Frank J. Galiano
President

Date
February 17, 1988
Telephone Number
765-1888

CERTIFICATE OF STATUS OF FID

50 Additional Fees
required for
Certificate of Status

ORDER (1/8)

INFORMATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jon Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries.
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

69 FEB 27 1989

1. Name and Address of Corporation (Principal Office)
ROZAP, INC.
5353 North Federal Highway
Ft. Lauderdale, FL 33308
Ch. # 576821

2. Other Office(s) Address(es) (If Different from Principal Office, PO Box Number Allowed, NOT Suite #)

3. Street Address 21
4. PO Box No. 22
5. City and State 23
6. Zip Code 24

1. Date Incorporated or Qualified to Do Business in Florida 6-23-78	2. Number of Officers Must be at least 3	3. Date of Last Report 2-24-88												
4. Name(s) and Street Address(es) of Officer(s) and Director(s) (Do NOT Use PO Box Numbers)	5. Street Address(es) of Officer(s) and Director(s) (Do NOT Use PO Box Numbers)	6. City and State												
<table border="1"> <thead> <tr> <th>Name(s) of Officers and Directors</th> <th>Title</th> <th>Street Address(es) of Officer(s) and Director(s) (Do NOT Use PO Box Numbers)</th> <th>City and State</th> </tr> </thead> <tbody> <tr> <td>FRANK J. CALGANO</td> <td>VP/D</td> <td>5353 N. Federal Highway</td> <td>Ft. Lauderdale, FL</td> </tr> <tr> <td>LAURA R. DUNLAP</td> <td>A/S</td> <td>502 East Park Avenue</td> <td>Tallahassee, FL</td> </tr> </tbody> </table>	Name(s) of Officers and Directors	Title	Street Address(es) of Officer(s) and Director(s) (Do NOT Use PO Box Numbers)	City and State	FRANK J. CALGANO	VP/D	5353 N. Federal Highway	Ft. Lauderdale, FL	LAURA R. DUNLAP	A/S	502 East Park Avenue	Tallahassee, FL		
Name(s) of Officers and Directors	Title	Street Address(es) of Officer(s) and Director(s) (Do NOT Use PO Box Numbers)	City and State											
FRANK J. CALGANO	VP/D	5353 N. Federal Highway	Ft. Lauderdale, FL											
LAURA R. DUNLAP	A/S	502 East Park Avenue	Tallahassee, FL											
		02/27/89 00212 001 ANNUAL REPORT ANNUAL REPORT CERT/PHOTO COPY ===== TOTAL 40.00												

REGISTERED AGENT INFORMATION

1. Name and Address of Current Registered Agent
Dominick F. Miniaci, P.A.
621 E. Broward Blvd.
Ft. Lauderdale, FL

2. Street Address 1 (Do NOT Use PO Box Numbers)
3. Street Address 2 (Do NOT Use PO Box Numbers)
4. City and State 21

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation or company hereby certifies to the Secretary of State of Florida, and states that it is authorized to change its registered office or registered agent, or both, in the State of Florida. Such change(s) are authorized by resolution duly adopted by its board of directors or I hereby accept the appointment of registered agent in accordance with and accept the obligations of Section 607.037, F.S.

SIGNATURE (Registered Agent Accepting Appointment) **DAL**

10. If a foreign corporation, date first transacted business in Florida

11. See signature instructions under instructions on reverse side of this form.
I Certify That I Am An Officer or Director of the Corporation, the Name of Which is Entered on This Report, as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature on This Report Shall Have the Same Legal Effect as if Made Under Oath.
(Check by Foreign Signing Agent if Applicable)

Signature: **Laura R. Dunlap**
Typed Name of Signing Officer or Director: **Laura R. Dunlap**
Title: **Assistant Secretary**
Telephone Number: **904-222-9171**



Florida Department of State, Jim Smith, Secretary of State

Inv. 417
acct. 0450
ch.# 576821

RESIGNATION OF OFFICER AND/OR DIRECTOR

AFFIDAVIT

576821

STATE OF Florida
COUNTY OF Leon

03/06/89	00025	001
REGISTERED AGENTS		
REGISTERED AGENT		20.00
TOTAL		20.00

I Laura R. Dunlap after being duly sworn, state that to the best of my knowledge, information and belief, and under penalties of perjury, the following is true and correct:

1. I Laura R. Dunlap, hereby resign as Assistant Secretary of ROZAP, INC. (Title) ROZAP, INC., a Florida corporation; (Name of Corporation)

- 2. That the corporation has been notified in writing of the resignation; and
- 3. That corporate minutes relating to the resignation are unavailable.

FURTHER AFFIANT SAYETH NOT.

Laura R. Dunlap
AFFIANT

Sworn to and subscribed before me this 24th day of February, 1989

[Signature]
NOTARY PUBLIC

My Commission Expires: _____

FILING FEE IS \$20.00

FILE NOW! THIS REPORT MUST BE FILED BY NOVEMBER 7, 1990. OR THIS CORPORATION WILL BE DISSOLVED. FEE TO REINSTATE IS \$236.25

CORPORATION
ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED
SEP 27 1990
900 NORTHEAST 26TH AVENUE
FORT LAUDERDALE, FLORIDA
33304

Read Notice and Instructions on Other Side Before Making Changes
Filing Fee of \$35 Required. Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office
576821 3
ZIP + 4 PRESORT
ROZAP, INC.
5353 N. FED. HWY.
FT. LAUDERDALE, FL 33308-3236

3. Date of Incorporation or Qualification to Do Business in Florida: **06/23/1978**
FEE NUMBER: **59-1488113**
FEE NUMBER APPLIED FOR: **FF 123456789**

1. Title	2. Name of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Give Post Office Box Number)	4. City and State
V/D	GALGANO, FRANK J	5353 N FEDERAL HWY	FT LAUDERDALE, FL
A/S	DUNLAP, LAURA R.	***RESIGNED 03-01-89***	TALLAHASSEE, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent
MINIACI, DOMINICK F., P.A.
821 E. BROWARD BLVD.
FT. LAUDERDALE, FL 33301

8. I warrant to the public that I am a resident of this state and that I am qualified to accept service of process on behalf of the corporation. I warrant that I am not a minor, an incompetent, or a person who has been adjudicated as such. I warrant that I am not a person who has been convicted of a crime involving moral turpitude within the last five years. I warrant that I am not a person who has been convicted of a crime involving moral turpitude within the last five years. I warrant that I am not a person who has been convicted of a crime involving moral turpitude within the last five years.

SIGNATURE: _____ DATE: _____

10. I warrant that the information and data on this annual report of the corporation is true and correct and that it is a true and correct statement of the facts and circumstances of the corporation as of the date of the report.

Signature: *[Handwritten Signature]*
Typed Name: **FRANK J. GALGANO**
Title: **Pres**
Telephone Number: **305-565-1858**

11. Should you desire a certificate of status check the box: **CERTIFICATE OF STATUS DESIRED**

SS Annual Fee required by a Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FEATSON
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT # 576821 (3)**
ZIP + 4 PRESORT
ROZAP, INC.
900 NORTHEAST 26TH AVENUE
FT. LAUDERDALE, FL 33304-3607

2. If Address in Block 1 is incorrect in any way, enter the correct ADDRESS below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address
22 P.O. Box
23 City and State
24 Zip Code

3. Date Incorporated or Existing To the Business in Florida: **08/23/1978** 4. FEI Number: **59-1988113** 5. FEI Number Assigned For: **0** 6. **\$8.75 Additional Fee required for a Certificate of Status in 1991**

7. Names and Street Addresses of Each Officer and Director (Indicate the corporation's headquarters and the address of each officer and director's residence.)
The Office Address City and State
8. **V/D GALGANO, FRANK J. 6353 N FEDERAL HWY FT LAUDERDALE, FL**
A/S DUNLAP, LAURA R. *RESIGNED 03-01-89*** TALLAHASSEE, FL**
V/D Galgano, Frank J. 900 N.E. 26th Ave. Ft. Lauderdale

REGISTERED AGENT INFORMATION

MINIACI, DOMINICK F., P.A.
821 E. BROWARD BLVD.
FT. LAUDERDALE, FL 33301

FL

DATE: **2/5/91**

Frank J. Galgano
Frank J. Galgano V. Pres./Director

DATE: **2/5/91**
Telephone Number District: **(305) 565-1888**

FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State \$8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FRED

FILING FEE \$61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation DOCUMENT # 576821 (3)

ROZAP, INC.
900 NORTHEAST 26TH AVENUE
FORT LAUDERDALE FL 33304-3607

2. Date of Incorporation

02/13/1991

59-1988113

06/23/1978

3. Names and Street Addresses of Last of year (1991) Officers and Directors

1	2	3	4
Name	Position	Address	City
V/D	GALGANO, FRANK J	900 NE 26TH AVE.	FT LAUDERDALE, FL

REGISTERED AGENT INFORMATION

4. Name and Street Address of Registered Agent

MINIACI, DOMINICK F., P.A.
821 E. BROWARD BLVD.
FT. LAUDERDALE, FL 33301

5. Name and Street Address of Registered Agent

6. Name and Street Address of Registered Agent

7. Name and Street Address of Registered Agent

8. Name and Street Address of Registered Agent

SIGNATURE

Frank J. Galgano President

2/11/92

305 565-1888

12. Should you want to report base to the Election Canvass on Florida's Ballot Form, please include an affidavit. See also the Ballot Form.

File Now. Filing Fee after May 1 is \$225.00

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
201 South
Cannon Street
TALLAHASSEE, FLORIDA 32301
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation DOCUMENT # 576821 (3)

ROZAP, INC.
900 NE 26TH AVE
FORT LAUDERDALE FL 33304-3607

DO NOT WRITE IN THIS SPACE

2. Date of Last Report 06/23/1978 3a. Date of Last Report 04/03/1992

4. Filing Number 591988113 Applied For State Authority

FILING FEE \$200.00 ANNUAL REPORT \$41.25 - \$138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5. Combination of State Fees \$8.75 Additional Fee Required

6. Foreign Ownership Premium \$5.00 May Be Added to Fees

7. Supplemental Fee \$138.75 Supplemental Fee Not Required

8. The Corporation has elected to change the Under Sec. 199.032, Florida Statutes. Yes No

2. Mailing Agent
23. State of Florida
24. Name and Address of Current Registered Agent

MINIACI, DOMINICK F., P.A.
821 E. BROWARD BLVD.
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
61. Title
62. Mailing Address, P.O. Box Number, or Other Address
63.
64. State FL 65. Telephone 66. County

11. State of Florida
12. Name and Address of Registered Agent

V/D
GALGANO, FRANK J
900 NE 26TH AVE.
FT LAUDERDALE FL

13. State of Florida
14. Name and Address of Registered Agent

SIGNATURE
FRANK J. GALGANO Director

DATE 4/20/93
TELEPHONE NUMBER (305) 565-1888

CORPORATION ANNUAL REPORT 1994



FLORIDA DEPARTMENT OF STATE
 Don Davis
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED AND FILED
 9th MAY - 1st PM 2:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

1. Corporation Name: **ROZAP, INC**
 DOCUMENT # **576821**

2. Mailing Address: **1990 EAST SUNRISE BLVD FT LAUDERDALE, FL 33304**
 3. Principal Place of Business: **1990 E SUNRISE BLVD FT LAUDERDALE, FL 33304**

4. Fiscal Year: **6/6/78**
 5. Total Assets: **\$9,192,955**
 6. Current State of Florida: **\$875**
 7. Minimum Expense from \$100 to \$500:
 8. The corporation has been changed on under 5, 10, 15, 20, 25, 30, 35, 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100: Yes No

9. Name and Address of Current Registered Agent: **PAUL CASTELLANO 1990 E SUNRISE BLVD FT LAUDERDALE, FL 33304**

10. Name and Address of New Registered Agent: **FL 15 To Cash**

11. I, the undersigned, being the duly authorized officer or agent of the corporation, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

12. OFFICERS AND DIRECTORS

12-01 NAME	PAUL CASTELLANO
12-02 TITLE	1990 E SUNRISE BLVD
12-03 STREET ADDRESS	FT LAUDERDALE, FL 33304
12-04 CITY	
12-05 STATE	
12-06 ZIP	
12-07 OFFICE ADDRESS	
12-08 CITY	
12-09 STATE	
12-10 ZIP	
12-11 NAME	
12-12 TITLE	
12-13 STREET ADDRESS	
12-14 CITY	
12-15 STATE	
12-16 ZIP	

13. CHANGES TO CAPITALS AND DISBURSEMENTS

13-01 TYPE	
13-02 DATE	
13-03 AMOUNT	
13-04 TYPE	
13-05 DATE	
13-06 AMOUNT	
13-07 TYPE	
13-08 DATE	
13-09 AMOUNT	
13-10 TYPE	
13-11 DATE	
13-12 AMOUNT	

14. I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE: *Paul Castellano* **May 6, 1994**

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra E. Mitchell
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 11 PM 3:01

DOCUMENT # 576821 (3)

ROZAP, INC.

Principal Place of Business: 1990 SUNRISE BLVD FT. LAUDERDALE FL 33304
Mailing Address: 1990 SUNRISE BLVD FT. LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Created: **06/23/1978** 3a. Date of Last Report: **05/01/1994**
4. FIC Number: **59-1988113** Approver For: **FIC Approvals**
5. Certificate of Status Current: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
7. This corporation has liability insurance in compliance with Florida Statutes: Yes No

2. Principal Place of Business: 2a. Mailing Address
21. State: **FL** 2b. State: **FL**
22. City & State: 23. City & State
24. Zip: 25. Zip: 26. Country: 27. Country

9. Name and Address of Current Registered Agent
**CASTELLANO, PAUL
1990 E. SUNRISE BLVD
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent
81. Name: _____
82. Street Address (or Box Number if Not Acceptable): _____
83. _____
84. City: _____ FL 85. Zip Code: _____

11. Pursuant to the provisions of Sections 607.1202 and 607.1404, 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, if they, acting in the approved or approved agent, have complied and signed the provisions of Section 607.0405, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

FILE NO.	NAME	STREET ADDRESS	CITY & STATE	ZIP
001	CASTELLANO, PAUL	1990 E. SUNRISE BLVD	FT. LAUDERDALE FL	33304
002				
003				
004				
005				
006				
007				
008				
009				
010				

13. ALTERNATIONS (PAGE 1) TO OFFICERS AND DIRECTORS OF:

FILE NO.	NAME	STREET ADDRESS	CITY & STATE	ZIP	TYPE
001					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
002					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
003					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
004					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
005					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
006					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
007					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
008					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
009					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc
010					<input type="checkbox"/> Corp <input type="checkbox"/> Assoc

14. I, the undersigned, certify that the information furnished in this report is true and correct, and that I am not qualified for the employment stated in the report. I further certify that the corporation is in good standing in the State of Florida, and that the corporation is not in violation of any law, statute, or regulation of the State of Florida. I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that the report is true and correct.

SIGNATURE: _____ **Paul Castellano** 4-555 767-1421