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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 630004 (0)

1. Corporation Name
ROPS, INC.

Principal Place of Business
1111 KANE CONCOURSE #301
BAY HARBOR ISLANDS FL 33154

Mailing Address
1111 KANE CONCOURSE #301
BAY HARBOR ISLANDS FL 33154

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/19/1979

	2. Principal Place of Business	2a. Mailing Address
21	#412 E	PH14 SO.
Suite, Apt. #, etc. 22	2255 GLADES RD	10275 COLLINS AVE
City & State 23	BOCA RATON, FL	BAL HARBOUR, FL
Zip 24	33431	33154
Country 25	USA	USA
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4. FEI Number 59-1935947 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SILVERMAN, O.P. RALFE JR.
1111 KANE CONCOURSE (301)
BAY HARBOR FL 33154

10. Name and Address of New Registered Agent

81 Name RALFE O. P. SILVERMAN, JR.
82 Street Address (P.O. Box Number is Not Acceptable) 10275 COLLINS AVE
83 PH14 SO
84 City BAL HARBOUR FL 85 Zip Code 33154

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SILVERMAN, RALFE O.P.JR. ~~10155~~ COLLINS AVE. #1502 1027 Collins BAL HARBOUR FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	SILVERMAN, RALFE OP ☒ Change ☐ Addition 10275 COLLINS AVE PH14SA BAL HARBOUR, FL 33154
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BARNETT, SCOTT R. 12901 SW 56 ST FT LAUDERDALE FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	BARNETT, SCOTT R. ☒ Change ☐ Addition 1295 BISCAYNE POINTE MIAMI BEACH, FL 33141
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS SILVERMAN, SELMA ~~10155~~ COLLINS AVE, ~~#1502~~ 10275 BAL HARBOUR FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SILVERMAN, SELMA ☒ Change ☐ Addition 10275 COLLINS AVE PH14SO BAL HARBOUR, FL 33154
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 600002526936 -05/18/98--01041--025 ***150.00

CR2E034 (10/97)

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 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 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 attachment with an address.

SIGNATURE: [signature] RALFE O. P. SILVERMAN JR. 305 5/14/98