


FILE NOW: FILING FEE IS \$61.25

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Jun 18 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **756142** (6)

1. Corporation Name  
**ROUMELIOTIKO SOCIETY OF FLORIDA, INC.**

Principal Place of Business <b>2500 NE 49 LIGHTHOUSE POINT FL 33064</b>	Mailing Address <b>6810 MIAMI LAKES MIAMI LAKES FL 33014 US</b>
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2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country	2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country
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3. Date Incorporated or Qualified <b>02/02/1981</b>
4. FEI Number <b>NOT APPLICABLE</b>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent  
**DIMITRIOU, MARIA  
5112 TAFT ST  
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent <b>81</b> Name <b>Maria Dimitriou</b> <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>5112 Taft St</b> <b>84</b> City <b>Hollywood FL</b> <b>85</b> Zip Code <b>33021</b>
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Maria Dimitriou (NOTE: Registered Agent signature required when reinstating) DATE **6/12/98**

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIGALOS, THEOFANIS 290 NW 125TH ST NORTH MIAMI FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RIGAS, JOHN 5006 W PARK RD HOLLYWOOD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DIMITRIOU, MARIA 5112 TAFT ST HOLLYWOOD FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARRAS, GERASIMOS 4812 NW 15TH ST COCONUT CREEK FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Theofanis Rigalos</b> <b>290 NW 125 ST</b> <b>North Miami FL</b>
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>John Rigas</b> <b>440 Paradise Isle Blvd Ap 205</b> <b>Hallandale FL 33009</b>
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Maria Dimitriou</b> <b>5112 Taft St</b> <b>Hollywood FL 33021</b>
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Maria Dimitriou</b> <b>5112 Taft St</b> <b>Hollywood FL 33021</b>
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Maria Dimitriou 6/12/98 9:54

CR2E037 (10/97)