

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F02496

(0)

1. Corporation Name

RICHARD ROMANOFF ASSOCIATES, INC.



Principal Place of Business

2155 NW 60TH CIRCLE
BOCA RATON FL 33496

Meeting Address

2155 NW 60TH CIRCLE
BOCA RATON FL 33496

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip Country

24
25

2a. Meeting Address

26
Suite, Apt. #, etc.

27
City & State

28
Zip Country

29
30

9. Name and Address of Current Registered Agent

ROMANOFF, RICHARD B.
2155 NW 60TH CIRCLE
BOCA RATON FL 33496

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 602.05(1)(b) and 602.05(1)(c), 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 602.05(1)(b), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☐ DELETE
NAME	ROMANOFF, RICHARD, SR.	
STREET ADDRESS	2655 NW 60TH CIR	
CITY, ST, Zip	BOCA RATON FL	
TITLE	VS	☐ DELETE
NAME	ROMANOFF, LOIS	
STREET ADDRESS	2655 NW 60TH CIR	
CITY, ST, Zip	BOCA RATON FL	
TITLE	VP	☐ DELETE
NAME	PACKER, WENDY	
STREET ADDRESS	1 LONE PINE LANE	
CITY, ST, Zip	WESTPORT CT	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, Zip		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, Zip		

13.

1. NAME	
1. STREET ADDRESS	
1. CITY, ST, Zip	
2. NAME	
2. STREET ADDRESS	
2. CITY, ST, Zip	
3. NAME	
3. STREET ADDRESS	
3. CITY, ST, Zip	
4. NAME	
4. STREET ADDRESS	
4. CITY, ST, Zip	
5. NAME	
5. STREET ADDRESS	
5. CITY, ST, Zip	
6. NAME	
6. STREET ADDRESS	
6. CITY, ST, Zip	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied by the corporation is true and correct, and that the signature of the officer or director is true and correct. My signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation, and that the information is true and correct as required by Chapter 602, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on a call number with appendices.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD B. ROMANOFF

4/15/96

407 994 9499

CR2E034 (12/95)