

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F09646** (3)

1. Corporation Name

ROGERSON INVESTMENTS CORPORATION.

Principal Place of Business

**2307 S.W. 37 AVE., SUITE 300
MIAMI FL 33145**

Mailing Address

**2307 S.W. 37 AVE., SUITE 300
MIAMI FL 33145**



2. Principal Place of Business

21 **800 Douglas Road**

Suite, Apt. #, etc.

22 **Suite 225**

City & State

23 **Coral Gables, Fl.**

Zip

24 **33134**

Country

USA

2a. Mailing Address

26 **800 Douglas Road**

Suite, Apt. #, etc.

27 **Suite 225**

City & State

28 **Coral Gables, Fl.**

Zip

29 **33134**

Country

USA

3. Date Incorporated or Qualified

10/17/1980

3a. Date of Last Report

04/28/1995

4. FEI Number

59-2073715

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 has liability for intangible tax under s. 199.032,
Florida Statutes.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**FENTE, MANUEL F., ESQ.
1835 W FLAGLER ST., SUITE 201
MIAMI FL 33135**

10. Name and Address of New Registered Agent

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 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 in block, in full, and accompanied by the date.

Signature typed or printed in block, in full, and accompanied by the date.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

**PD
ROGER, OSCAR JR
2307 SW 37 AVE., #300
MIAMI, FL 00000**

TITLE NAME ☒ DELETE

**S
CURRAIS, MILAGROS
2307 SW 37 AVE., #300
MIAMI FL**

TITLE NAME ☒ DELETE

**VP
ROGER, MAYREN
2307 SW 37 AVE., #300
MIAMI FL**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

TITLE NAME ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**800 Douglas Road, #225
Coral Gables, Fl. 33134**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

**SVP
CASTRO, MAYREN R.
800 Douglas Road, #225
Coral Gables, Fl. 33134**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Oscar A. Roger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96

(305) 448-4091

DATE DAYTIME PHONE

CR2E034 (12/95)