

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 # F61713 (6)

1. Corporation Name

ROLACIO INVESTMENT CORPORATION

Principal Place of Business

1 S.E. 3RD AVE.
STE. #1400
MIAMI FL 33131

Mailing Address

1 S.E. 3RD AVE.
STE. #1400
MIAMI FL 33131

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

COPROLITE CORPORATION
1 SE 3 AVE
SUITE 1400
MIAMI FL 33131

3. Date Incorporated or Qualified

01/15/1982

3a. Date of Last Report

04/18/1995

4. FID Number

59-2266117

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

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 1607.1506, 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. Thereby, accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	SD	☐ DELETE
NAME	CIOCCA, LAURA	
STREET ADDRESS	1 SE 3 AVE 1400	
CITY-STATE-ZIP	MIAMI FL	
TITLE	PD	☐ DELETE
NAME	CIOCCA, ROMANO	
STREET ADDRESS	1 SE 3 AVE 1400	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VD	☐ DELETE
NAME	BLASS, STEPHEN A	
STREET ADDRESS	1 SE 3 AVE 1400	
CITY-STATE-ZIP	MIAMI, FL 00000	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing 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 its predecessor or successor, or authorized 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 amendment with an address.

SIGNATURE:

Romano Ciocca President
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-96 305-377-9353
DATE OF FILING FEE

CR2E034 (12/95)