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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mgrtham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F62285

Mailing Addrso

ROLIZ, INC.

Principal Place of Pusings

MIAMI FL 33131

CITY-ST-ZIP

FILED
Jun 17 1997 8:00am
Secretary of State

7ip Code 33722

Till Cipal Flace	DI DUSITICOS	Walling Address				
8100 NW 72 AVE. BTE. #128 Miami FL 33122		3100 NW 72 AVE. Ste. #128 Miami FL 33122-1336				
					1	Date of Last Report 14/25/1996
2. Principal Plac	e of Business	2a, Mailing Ad	ddress	····	4. FEI Number	Applied For
1		26			59-2328634	Not Applicable
Suite, Apt. #,	elc.	Suite, Apt	#, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & Sta	te		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 4	Country 25	Zip 29	30	ountry .	8. This corporation has liability for intang Florida Statutes	ible tax under s. 199.032, ☐ No
Name and Address of Current Registered Agent					Name and Address of New Register	ed Agent
EDEEMAN NEWMAN & RITTEDMAN				81 Name PAUL M. Sloom Condens 82 Street Address (P.O. Box Number is Not Acceptable) BSS/ W. Surviva 3 Luy		

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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 apospt the obligations of, Section 607.0505, Florida Statutes. Paul M. Bloomgarden 6/13/97 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. **OFFICERS AND DIRECTORS** 13. DELETE TITLE 1.11006 ☐ Change ☐ Addition 23145 NAMAD, ROBERTO 1.2 NAMÉ NAME BUCA MATIN, FL 3100 NW 72-AVE #126 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CHY-S1-7IP DELETE 1168.50: 18th street Addition TITLE 21 TITLE NAME 2.2 NAMI STREET ADDRESS 23 STHELT ADDRESS Directum CITY-ST-ZIP 2 4 CITY- ST- ZIP DELETE Change Addition TITLE 31 THEF NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. DITY-ST-7IP TITLE DELETE 41 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELFTE Change Addition TITLE 6.1 1111.6 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 C(1Y - S1 - Z(P 14. I do 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 eath; 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.