

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

FILED  
Apr 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F62285 (4)  
1. Corporation Name  
ROLIZ, INC.

Principal Place of Business 3100 NW 72 AVE. STE. #126 MIAMI FL 33122	Mailing Address 3100 NW 72 AVE. STE. #126 MIAMI FL 33122
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 02/12/1982	
				4. FEI Number 59-2328634	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLOOMGARDEN, PAUL M  
8551 W. SUNRISE BLVD.  
STE. 100A  
FT. LAUDERDALE FL 33322

81 Name	ROBERTO NAMAD
82 Street Address (P.O. Box Number is Not Acceptable)	3100 NW 72 AVE #126
83	
84 City	MIAMI
85 Zip Code	FL 33122

11. Pursuant to the provisions of Sections 607.0542 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 name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

03/18/98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	ST	DELETE		1.1 TITLE	P/D	Change	Addition
NAME	STROM, STEVEN			1.2 NAME	ROBERTO NAMAD		
STREET ADDRESS	23149 LERRITABE CIRCLE			1.3 STREET ADDRESS	3100 NW 72 AVE #126		
CITY - ST - ZIP	BOCA RATON FL 33433			1.4 CITY - ST - ZIP	MIAMI FL 33122		
TITLE	D	DELETE		2.1 TITLE		Change	Addition
NAME	GOZLAN, ALBERT			2.2 NAME			
STREET ADDRESS	1168 SW 18TH ST.			2.3 STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON FL 33486			2.4 CITY - ST - ZIP			
TITLE		DELETE		3.1 TITLE		Change	Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY - ST - ZIP				3.4 CITY - ST - ZIP			
TITLE		DELETE		4.1 TITLE		Change	Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY - ST - ZIP				4.4 CITY - ST - ZIP			
TITLE		DELETE		5.1 TITLE		Change	Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE		DELETE		6.1 TITLE		Change	Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY - ST - ZIP				6.4 CITY - ST - ZIP			

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

SIGNATURE: X

03/18/98

CR2E034 (10/97)