

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F94000005207 (5)**

1. Corporation Name

ROY DATA INTERNATIONAL, INC.



Principal Place of Business

**3313 NE 15TH COURT
FORT LAUDERDALE FL 33304**

Mailing Address

**3313 NE 15TH COURT
FORT LAUDERDALE FL 33304**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**ROYZEN, BORIS
3313 NE 15TH COURT
FORT LAUDERDALE FL 33304**

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 607.0702 and 607.1502, 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. Said 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, Sections 607.0905, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1	12.2	12.3
TITLE	NAME	STREET ADDRESS
	C	<input type="checkbox"/> DELETE
NAME	ROYZEN, BORIS	
STREET ADDRESS	3313 NE 15TH COURT	
CITY, ST, ZIP	FORT LAUDERDALE FL 33304	
TITLE	T	<input type="checkbox"/> DELETE
NAME	ROYZEN, EVA	
STREET ADDRESS	3313 NE 15TH COURT	
CITY, ST, ZIP	FORT LAUDERDALE FL 33304	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

13.1	13.2	13.3
TITLE	NAME	STREET ADDRESS
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14 TITLE	15 NAME	16 STREET ADDRESS
17 CITY, ST, ZIP	18 TITLE	19 NAME
20 STREET ADDRESS	21 CITY, ST, ZIP	22 NAME
23 CITY, ST, ZIP	24 TITLE	25 STREET ADDRESS
26 CITY, ST, ZIP	27 NAME	28 STREET ADDRESS
29 CITY, ST, ZIP	30 TITLE	31 NAME
32 CITY, ST, ZIP	33 STREET ADDRESS	34 CITY, ST, ZIP
35 CITY, ST, ZIP	36 NAME	37 STREET ADDRESS
38 CITY, ST, ZIP	39 STREET ADDRESS	40 CITY, ST, ZIP
41 CITY, ST, ZIP	42 NAME	43 STREET ADDRESS
44 CITY, ST, ZIP	45 STREET ADDRESS	46 CITY, ST, ZIP
47 CITY, ST, ZIP	48 NAME	49 STREET ADDRESS
50 CITY, ST, ZIP	51 STREET ADDRESS	52 CITY, ST, ZIP
53 CITY, ST, ZIP	54 NAME	55 STREET ADDRESS
56 CITY, ST, ZIP	57 STREET ADDRESS	58 CITY, ST, ZIP
59 CITY, ST, ZIP	60 NAME	61 STREET ADDRESS
62 CITY, ST, ZIP	63 STREET ADDRESS	64 CITY, ST, 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(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 registered office trustee authorized to contribute to a 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: *Boris Royzen* / **BORIS ROYZEN**

04/01/96 (954) 566-2370

CR2E034 (12/95)