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Mar 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G99396 (5)

1. Corporation Name
ROSSAKO, INC.

Principal Place of Business
EXECUTIVE SQUARE PARK OFFICE, BLDG. 408
SUITE 138
TAMPA FL 33609
US

Mailing Address
P.O. BOX 7212
WESLEY CHAPEL FL 33543-7212
US



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
03/08/1984

3a. Date of Last Report
01/24/1996

4. FEI Number

59-2381050

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

MEJDOUB H., RAMON A., SR.
207 TAMPA DOWNS BLVD.
LUTZ FL 33549

10. Name and Address of New Registered Agent

81 Name

Argentina De MEJDOUB

82 Street Address (P.O. Box Number is Not Acceptable)

4721 Tampa Downs Blvd.

83

84 City

LUTZ, FL. 33549

FL

85 Zip Code
33549

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 name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

02-18-97

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME MEJDOUB, RAMON H.A. SR.
STREET ADDRESS 607 TAMPA DOWNS BLVD.
CITY - ST - ZIP LUTZ FL 4721

TITLE ST ☐ DELETE
NAME MEJDOUB, ARGENTINA
STREET ADDRESS 407 TAMPA DOWNS BLVD. 4721
CITY - ST - ZIP LUTZ FL

TITLE VP ☐ DELETE
NAME SLOAN, JAN MARIE
STREET ADDRESS 407 TAMPA DOWNS BLVD. 4721
CITY - ST - ZIP LUTZ FL

TITLE C ☐ DELETE
NAME WELLS, ROGER
STREET ADDRESS 209 HICKORY LN.
CITY - ST - ZIP LUTZ FL

TITLE HO ☐ DELETE
NAME WELLS, FLORINDA
STREET ADDRESS 209 HICKORY LN.
CITY - ST - ZIP LUTZ FL

TITLE ☐ 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

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 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:

Argentina De Mejdoub ARGENTINA MEJDOUB 01-10-97 (813) 287-2951

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)