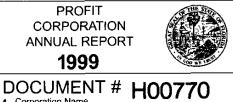
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90013 026 ***150.00

1. Corporation ROLLER	ENTERPRISES INC.	,			
Principal Place	of Business	Mailing Address			- I TPATATE BEST DALLE BREST LOGIE LOGIE DEST DEST DEST DEST DESTE DESTE DESTE DE SET DE LOGIE BEST DE LOGIE POR L
11450 NW 37 ST CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065			•		DO NOT WRITE IN THIS SPACE
us us					3. Date Incorporated or Qualifed
					04/26/1984
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21		26			59-2414839 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
22		27			. 1 66 Nequiled
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28	C		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible Personal Property Tax. ☑Yes □ No
24	25		30		Personal Property Tax. Serves No. 10. Name and Address of New Registered Agent
	9. Name and Address of Currer	t Registered Agent	81	Name	10. Halle and Address of New Registered Agent
ROLLER, SANDRA A. 11450 NW 37 ST CORAL SPRINGS FL 33065			82		ress (P.O. Box Number is Not Acceptable)
			83		
			84	City	FL 85 Zip Code
agent. I ai SIGNATURE	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	ua Statutes	•	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F ID DIRECTORS	-i -	nt signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TITLE	P OFFICERS AI	DELETE	13. 1.1 TITLE		ADDITIONS/GNANGES TO OFFICE AND DIRECTOR WITE
NAME	ROLLER, SANDRA A.		1 2 NAME		
	AAAFO BBM OT OT		1.3 STREET	TANNESS	
STREET ADDRESS	00041 0001100 FL 00005		1.4 CITY-S		
CITY-ST-ZIP	VP	DELETE 2.1 TI		1-232	☐ Change ☐ Addition
	ROLLER, CURTIS		2.2 NAME		_ , · _
NAME CTREET ADORESS	11450 NW 37 ST		2.3 STREET	TANDRESS	
STREET ADORESS	CORAL SPRINGS FL 33065		2.4 CITY-5		
CITY-ST-ZIP TITLE	COUNT OF THINGO I E 00000	☐ DELETE	3.1 TITLE	/1-4IF	Change Addition
NAME		<u></u>	3.2 NAME		= · -
STREET ADDRESS			3.3 STREET	TADORESS	
CITY-ST-ZIP			3.4. CITY-S		•
TITLE		☐ DELETE	4.1 TITLE	,,- <u>,,</u> -	☐ Change ☐ Addition
NAME			4. 2 NAME		· —
STREET ADDRESS			1	TADDRESS	
CITY-ST-ZIP			4.4 CITY-S	1	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	TADDRESS	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Additi
NAME			6.2 NAME		
			63 STREET	TADDRESS	

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, with all other like empowered.

6.4 CITY-ST-ZIP