FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **H00961** **(3)**

1. Corporation Name
ROMACA MANAGEMENT CORP.

Principal Place of Business
ATTN: SOVEREIGN CAPITAL GROUP
2333 PONCE DE LEON BLVD SUITE 1110
CORAL GABLES FL 33134

Mailing Address
ATTN: SOVEREIGN CAPITAL GROUP
2333 PONCE DE LEON BLVD SUITE 1110
CORAL GABLES FL 33134

3. Date Incorporated or Qualified: 04/23/1984
3a. Date of Last Report: 08/08/1995

2. Principal Place of Business
21 7128 S.E. RIVERS EDGE RD
22 Suite, Apt. #, etc.
23 City & State: JUPITER, FL.
24 Zip: 33458 25 Country: U.S.A

2a. Mailing Address
26 7128 S.E. Rivers Edge Rd.
27 Suite, Apt. #, etc.
28 City & State: JUPITER, FL.
29 Zip: 33458 30 Country: U.S.A.

4. FEI Number: 59-2396088 — 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
VERGARA, MANUEL F.
ATTN: SOVEREIGN CAPITAL GROUP
2333 PONCE DE LEON BLVD SUITE 1110
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name: VERGARA CARLOS M.
82 Street Address (P.O. Box Number is Not Acceptable): 7128 S.E. RIVERS EDGE RD.
83
84 City: JUPITER FL 85 Zip Code: 33458

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: CARLOS Vergara — 4-23-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	ERGARA, ROSA B.	
STREET ADDRESS	2333 PONCE DE LEON BLVD	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	V	☐ DELETE
NAME	VERGARA, CARLOS M.	
STREET ADDRESS	2333 PONCE DE LEON BLVD	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	VERGARA, ROSA B.	
1.3 STREET ADDRESS	7128 S.E. RIVERS EDGE RD.	
1.4 CITY-ST-ZIP	JUPITER, FL. 33458	
2.1 TITLE	VTD	☒ Change ☐ Addition
2.2 NAME	VERGARA CARLOS M.	
2.3 STREET ADDRESS	7128 S.E. RIVERS EDGE RD.	
2.4 CITY-ST-ZIP	JUPITER, FL. 33458	
3.1 TITLE	VD	☐ Change ☒ Addition
3.2 NAME	VERGARA MANUEL JR.	
3.3 STREET ADDRESS	7128 S.E. RIVERS EDGE RD.	
3.4 CITY-ST-ZIP	JUPITER, FL. 33458	
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		

CR2E034 (12/95)

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(3)(k), 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: 4-23-96 — 407-745-1826
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #