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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H56095

(3)

ROHAN, INC.

Mailing Address

Principal Place of Business AND LAND OF AUTO BIND

4000 LAND OH AVEC BLUD

FILED May 12 1997 8:00am Secretary of State



LAND O'LAKES FL 34639			LAND O'LAKES FL 34639-3923					
				3. Date incorpora 05/08/1985	ated or Qualified	\$a. Date of Last 07/05/1996	Report	
2. Principal F	Place of Business	2a, Mailing Address	2a. Mailing Address				Applied For	
21		26			2		lot Applicable	
Suite, Apt.	.#, etc.	Suite, Apt. #, etc	1	5. Certificate of S	itatus Desired		Additional Required	
City & Stat	lo .	City & State		6. Election Camp	aign Financing	\$5.00	May Be	
23		28		Trust Fund Co	ntribution	☐ Added	to Fees	
Ζιρ	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
24	25 9. Name and Address of Curr	rent Registered Agent	30	Florida Statute				
LIAL		tellt tregisteren Agent	81 Na	```	diees of How Ho	gieroreo Agoin		
	NIS, MICHAEL N.							
4608 LAND O LAKES BLVD. LAND O LAKES FL 34839				Street Address (P.O. Box Number is Not Acceptable)				
	10 0 Bullo E 01000		83			······		
			84 Cit	у		85 Zip	Code	
	to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob	2000 + 007 +500 Flacida 5	<u> </u>	and parameter and a thing	tataman for the n	FL 2	ite vericered	
SIGNATURE		agent and tille if applicable. AND DIRECTORS	(NOTE Registered Agent sign	nature required when reinstating)	•	ERS AND DIRECTO	PRS IN 12	
THUE	P	DELET		T T		Change		
NAMÉ	HANIS, MICHAEL N.		1.2 NAME					
STREET ADDRESS	4608 LAND O LAKES BLVD.		1.3 STREET ADDR	ESS				
CITY - ST - ZIP	LAND O LAKES FL 34639		1.4 CITY-ST-ZIP					
TITLE	V	DELETI	E 2.1 TITLE			Change	Addition	
NAMÉ	ROURKE, BRIAN E.		2.2 NAME					
STREET ADDRESS	4608 LAND O LAKES BLVD.	•	2.3 STREET ADOR					
CITY-ST-7IP TITLE	LAND O LAKES FL 34639	DELET	2.4 CITY-ST-2IP 3.1 TITLE			Change	Addition	
NAME		Em DELLA	3.2 NAME			Unange		
STREET ADDRESS			3.3 STREET ADDR	FSS				
CITY- ST-ZIF]		3.4. CITY - ST - ZIP	1				
1filf		☐ DELETI				Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDR	ess				
CITY-ST-ZIP			4.4 CITY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·		4 . 201	
TITLE		☐ DELET				☐ Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDR	tSS	•			
CITY-ST-ZIP THLE		DELETI	5.4 CITY-ST-ZIP 6.1 TITLE			Change	Addition	
NAME		F-1 255511	6.2 NAME			و المالي	based Filippinion	
STREET ADDRESS			6.3 STREET ADDR	FSS				
CITY-\$1-ZIP			6.4 CITY - ST - ZIP					
	·		0.7 0.11 01 21					

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 13 if changed, or on an attachment with an address.

Brian E. Rome (40) 4/30/57 (8/3)996-7547