

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
JAMES B. WATKINS  
Secretary  
Tallahassee, Florida 32399-0001

APPROVED  
AND  
FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **H65830** (2)  
ROBERTON-YOTT INTERNATIONAL, INC.

DO NOT WRITE IN THIS SPACE

3. Date first operated or qualified <b>07/03/1985</b>	3a. Date of last report <b>07/21/1994</b>
4. FEI Number <b>59-2593376</b>	Applied For Net Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under § 199(3)(2), Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Change of Principal Officers	2a. Filing Agency
21. Date of Report	26. Filing Agency
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent <b>ROBERTON, NANCY 491 NE 163RD STREET N. MIAMI BEACH FL 33162</b>	10. Name and Address of New Registered Agent 81. Name <b>ROBERTON-YOTT, NANCY</b> 82. Street Address <b>(CORRECTION)</b> 83. City 84. City <b>FL</b> 85. Zip Code
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11. Pursuant to the provisions of Sections 607 (b)(2) and 607 (5)(b), 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 agree to the provisions of Section 607 (5)(b), Florida Statutes.

SIGNATURE: *Nancy R. Yott* **NANCY R. YOTT** **5/5/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95	
NAME	ADDRESS	NAME	ADDRESS
<b>P</b> YOTT, ALAN E. 491 NE 163RD STREET N. MIAMI BEACH FL			<input type="checkbox"/> Change <input type="checkbox"/> Addition
VTS YOTT, NANCY R. 491 NE 163RD STREET N. MIAMI BEACH FL		<b>ROBERTON-YOTT, NANCY</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190 (3)(1)(b), Florida Statutes. I further certify that the information included on the 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. I am an officer or director of the corporation or the officer or trustee responsible for executing the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as required and with an address.

SIGNATURE: *Nancy R. Yott* **NANCY R. YOTT** **5/5/95** **905-954-3739**