

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90092 015 ***150.00

DOCUMENT # H91997 1. Entity Name ROPIX INTERNATIONAL CORPORATION					
Principal Place of Business 614 E HWY 50 #113 CLERMONT, FL 34711			Mailing Address 614 E HWY 50 #113 CLERMONT, FL 34711		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2623290	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
PICKERING, JAMES B III 13126 PLUM LAKE DR CLERMONT, FL 34711				Name Street Address (P.O. Box Number is Not Acceptable) City MINNEOLA	
				FL Zip Code 34715	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		JAMES B. PICKERING III, PRES. 04/01/2005 (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ROPER, WILLIAM C 60 ARBUTHNOT DRIVE DULUTH, MN 55810		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 6392 BERGSTROM RD. SABINAN, MN 55779	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC PICKERING, JAMES B III 13126 PLUM LAKE DR CLERMONT, FL 34711		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition MINNEOLA, FL 34715	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS LEE, DIANE E 101 PEPPERTREE DRIVE ORLANDO, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition ORLANDO, FL 32825	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HARRY H RAINEY JR 614 E HWY 50, #113 CLERMONT, FL 34711		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SCHMUCH, JAMES V 3701 DALEFORD RD. ORLANDO, FL 32808		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		PRESIDENT JAMES B. PICKERING III			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	
		04/01/2005		352-205-0479	