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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J24878

(7)

FILED Feb 20 1998 8:00am Secretary of State

	on Name K, ROUMELIS, AND ASSO	CIATES, INC							
% WILLIAM		-	AM H. ÇLARK						
1933 COMMONWEALTH LANE 1933 COMMONWEALTH LAN TALLAHASSEE FL 32303 TALLAHASSEE FL 32303						DO NOT WRITE IN THIS SPACE			
INLUMINOS	DEE PE DEGUS	TALLAN	MODEE PL BEBUS			3. Date Incorporated or Qualifie		SFACE	
						07/21/1986			
2. Principal f	Place of Business	2a. Mailin	g Address			4. FEI Number		A	applied For
21		26	_			59-2687996			lot Applicable
Sulte, Apt.	#, etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired			Additional
22		27	2: :			or commodic or claims bosines	_		Required
City & Sta	te	City &	State			6. Election Campaign Financing	_) May Be
Zip	Country	28 Zip		Countr	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution			to Fees
24	25	29		30	,	This corporation owes or has Personal Property Tax due Ju			ntangible
	9, Name and Address of Curr			30		10. Name and Address of New			
C	LARK, WILLIAM H.			81	Name				
	933 COMMONWEALTH LANE			82	Street Ac	ddress (P.O. Box Number is Not Accep	dalde)		
T/	ALLAHASSEE FL 32303				0,1001710	Sures (1.0. Box Hombor is Hot Accep	Addio)		
				83				<u> </u>	
				84	City			85 Zip	Code
							<u>FL</u>	_ ' '	
11 Durenont	to the provisions of Sections 607.05	502 and 607 1508					A DUIDAGO A	of apparation	
office or	registered agent, or both, in the Sta	te of Florida. Sucl	h change was a	es, the abov outhorized b	re-named co y the corpor	orporation submits this statement for th ration's board of directors. I hereby ac	cept the app	pointment as	its registered s realistered
office or agent. I a	registered agent, or both, in the Sta am familiar with, and \$40ept the obli	te of Florida. Sucl igations () , Soctio	h change was a on 60 .0505, Flo	es, the abovinthorized b orida Statute	re-named co y the corpores.	orporation submits this statement for the ration's board of directors. I hereby ac	cept the app	pointment as	its registered s registered
office or agent. I a	William	A Clar	R				2/18/4	pointment as	its registered
	Signature, typed or printed name of registered a	A Clar	R			quired when reinstating)	2/18/4 DATE	(8)	
SIGNATURE	Signature, typed or printed name of registered a	Los agunt and title if applicat	R	Registered Ag			2/18/4 DATE	(8)	
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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.