

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J 68344

1. Corporation Name

ROHRER PROPERTIES, INC. (7)

Principal Place of Business

Mailing Address

C/O CECIL T. FARRINGTON
1995 EAST OAKLAND PARK BLVD.
SUITE 110
FT. LAUDERDALE FL 33306

2. Principal Place of Business

2a. Mailing Address

21. SAME

26. AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. [25]

29. [30]

9. Name and Address of Current Registered Agent

FARRINGTON, CECIL T.
ATTORNEY AT LAW
1995 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE
FL 33306 SUITE 110

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. 00000281 4666--4

84. City

03/23/99 01010--005

****150.00 ****150.00

FL 85 Zip Code

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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when changing agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE [] DELETE

NAME ROHRER ANNA ROSA

STREET ADDRESS 10 WITMATTSTRASSE

CITY-ST-ZIP 2540 GRENCHEN SWITZERLAND

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

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(4)(g), 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, with all other like empowered.

SIGNATURE: Anna Rosa Rohrer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANNAROSA ROHRER, PRESIDENT
MARCH 16th 1999

FILED

99 MAR 19 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1987

4. FEI Number

98-0093736

Applied For
Not Applicable

5. Certificate of Status Desired []

\$8.75 Additional
Fee Required

6. Election Campaign Financing []

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax [] Yes [X] No

10. Name and Address of New Registered Agent

CR2E034 (1/1/98)