


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

FILED

May 05 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # J86213 (2)</b>					
<b>1. Corporation Name</b> <b>ROMI SALES, INC.</b>					



<b>Principal Place of Business</b> 471 N.E. 81 <sup>ST</sup> . MIAMI FL 33138		<b>Mailing Address</b> 471 N.E. 81 <sup>ST</sup> . MIAMI FL 33138	
<b>2. Principal Place of Business</b> 21 2150 N.W. 95 <sup>TH</sup> AVE Suite, Apt. #, etc.		<b>2a. Mailing Address</b> 26 2150 N.W. 95 <sup>TH</sup> AVE Suite, Apt. #, etc.	
<b>City &amp; State</b> 23 MIAMI FLORIDA Zip 33172 Country DADE		<b>City &amp; State</b> 28 MIAMI FLORIDA Zip 33172 Country DANE	

<b>3. Date Incorporated or Qualified</b> 07/31/1987		<b>3a. Date of Last Report</b> 05/01/1996	
<b>4. FEI Number</b> 59-2836645		<b>Applied For</b> <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>6. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

<b>9. Name and Address of Current Registered Agent</b> LUSKY, NAUM 471 N.E. 81TH STREET MIAMI FL 33138		<b>10. Name and Address of New Registered Agent</b> 81 Name MARVIN LUSKY 82 Street Address (P.O. Box Number is Not Acceptable) 2150 N.W. 95 <sup>TH</sup> AVE 83 84 City MIAMI FL 85 Zip Code 33172	
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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 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 4/28/97

<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	
TITLE PD NAME LUSKY, NAUM STREET ADDRESS 471 N.E. 81TH ST. CITY-ST-ZIP MIAMI FL 33138		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE PD NAME LUSKY, MARVIN STREET ADDRESS 471 N.E. 81TH ST. CITY-ST-ZIP MIAMI FL 33138		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2150 N.W. 95 <sup>TH</sup> AVE MIAMI FL 33172	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 4/28/97 (305) 513-0133

CR2E034 (9/96)