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Jan 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K67632

(5)

1. Corporation Name
ROMIST TRADING CORPORATION

Principal Place of Business
4936 SHERIDAN ST.
HOLLYWOOD FL 33021

Mailing Address
4936 SHERIDAN ST.
HOLLYWOOD FL 33021-2801



3. Date Incorporated or Qualified
02/22/1989
3a. Date of Last Report
03/07/1996

4. FEI Number
65-0138489
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 4936 SHERIDAN ST.
Suite, Apt. #, etc.
22
City & State
23 HOLLYWOOD, FLORIDA
Zip
24 33021
Country
25 U.S.A.
2a. Mailing Address
26 4936 SHERIDAN ST.
Suite, Apt. #, etc.
27
City & State
28 HOLLYWOOD, FLORIDA
Zip
29 33021
Country
30 U.S.A.

9. Name and Address of Current Registered Agent

CHARITON, ELLEN
4936 SHERIDAN ST.
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 607.0505, Florida Statutes.

SIGNATURE
Signature, type for printed name of registered agent and the 4 applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEEN, MAURICE S	1.2 NAME	
STREET ADDRESS	4936 SHERIDAN STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL 33021	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEEN, MICHAEL R.	2.2 NAME	
STREET ADDRESS	1320 NE 103RD STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33138	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEEN, ROBERTA C.	3.2 NAME	
STREET ADDRESS	1650 NE 115 STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33181	3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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: MAURICE S. STEEN, PRESIDENT
MAURICE S. STEEN
JANUARY 6, 1997 (954) 963-4852
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)