

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY 16 11 0:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K79613** (1)

1. Corporation Name
ROUDI ACQUISITION CORP.

Principal Place of Business Mailing Address
1104 PHEASANT CIRCLE WINTER SPRINGS FL 32708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/12/1989** 3a. Date of Last Report **05/11/1994**
4. FEI Number **59-2954302** 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**
7. This corporation has liability for intangible tax under § 199.034, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21. Suite Apt # etc 26. Suite Apt # etc
22. City & State 27. City & State
23. City & State 28. City & State
24. City & State 25. City & State 29. City & State 30. City & State

9. Name and Address of Current Registered Agent

**HUMPHRIES, J. GREGORY
201 E. PINE STREET
SUITE 700
ORLANDO FL 32801**

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 607.0100, 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. Thereby accept the appointment as registered agent. I am hereby accepting the obligations of Section 607.0100, Florida Statutes.

SIGNATURE

By: _____

By: _____

By: _____

12. OFFICERS AND DIRECTORS

OFFICE	D
NAME	ROUDI, JOSEPH P.
STREET ADDRESS	1104 PHEASANT CIRCLE
CITY & STATE	WINTER SPRINGS FL
OFFICE	D
NAME	ROUDI, MARILYN
STREET ADDRESS	1104 PHEASANT CIRCLE
CITY & STATE	WINTER SPRINGS FL
OFFICE	
NAME	
STREET ADDRESS	
CITY & STATE	
OFFICE	
NAME	
STREET ADDRESS	
CITY & STATE	
OFFICE	
NAME	
STREET ADDRESS	
CITY & STATE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY & STATE	
OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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CITY & STATE	
OFFICE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Sections 199.034(1)(a), 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. I am an officer or director of this corporation or the recipient or friend authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: *Marilyn Roudi* Marilyn Roudi

5/10/95 (402) 695-6245