

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:46

DOCUMENT # L60621 (4)

1. Corporation Name

ROSKAR CORP., INC.

Principal Place of Business

120 DUNES EDGE ROAD
JUPITER FL 33477

Mailing Address

120 DUNES EDGE ROAD
JUPITER FL 33477

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Outfitted
03/28/1990

3a. Date of Last Report
03/14/1994

4. FEI Number
65-0181659

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. 109.022,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRYDA, WILLIAM C.
120 DUNES EDGE ROAD
JUPITER FL 33477

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

(Type or hand or printed name of registered agent on the 1st signature)

(Print. Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

P
KRYDA, WILLIAM C.
120 DUNES EDGE ROAD
JUPITER FL 33477

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

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12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

VP
KLEIN, GABRIELE M
120 DUNES EDGE RD
JUPITER FL 33477

☐ Change ☒ Addition

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

☐ Change ☐ Addition

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

☐ Change ☐ Addition

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

☐ Change ☐ Addition

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

☐ Change ☐ Addition

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information furnished with this form is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(k), Florida Statutes. I further certify that the information furnished on this annual report or biennial 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

GABRIELE M. KLEIN
3/9/95
WILLIAM C. KRYDA
3/9/95

407-745-3006
407-745-3006