

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 06, 2004
Secretary of State**

DOCUMENT# N01000006831

Entity Name: ROMAN GROUP HOME, INC.

Current Principal Place of Business:

12511 SW 264ST
HOMESTEAD, FL 33032

New Principal Place of Business:

Current Mailing Address:

14603 SW 181 TERRACE
MIAMI, FL 33177

New Mailing Address:

FEI Number: 42-1561116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMAN, ONEIDA
14603 SW 181 TERRACE
MIAMI, FL 33177

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROMAN, ONEIDA
Address: 14603 SW 181 TERRACE
City-St-Zip: MIAMI, FL 33177

Title: SD () Delete
Name: OSORIO, PATRICIA
Address: 14603 SW 181 TERRACE
City-St-Zip: MIAMI, FL 33177

Title: TD () Delete
Name: BUENDIA, ENEIDA
Address: 14603 SW 181 TERRACE
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ONEIDA ROMAN

PD

07/06/2004

Electronic Signature of Signing Officer or Director

_____ Date