

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-21-2003 90127 026 ***150.00

FILED P02000024038
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUL 30 AM 8:49

DOCUMENT # P02000024038

1. Entity Name

Roman Publishing, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7936 Marbella Ct. S

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 692651

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO FL

City & State

ORLANDO FL

4. FEI Number

03-0405476

Applied For

Not Applicable

Zip

32834

Country

Zip

32869

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Spiegel + Urean P.A.

Street Address (P.O. Box Number is Not Acceptable)

1840 SW 22nd St.

4th Floor

City

Miami

FL

Zip Code

33145

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Lolita W. Snipes
STREET ADDRESS	7936 Marbella Ct. S
CITY-ST-ZIP	ORLANDO FL 32836
TITLE	Vice President
NAME	Jerome Snipes
STREET ADDRESS	5600 Collins Ave. Unit 6-P
CITY-ST-ZIP	Miami Beach, FL 33140
TITLE	Treasurer
NAME	MIRA DELANE
STREET ADDRESS	4330 Hillcrest Dr. #120
CITY-ST-ZIP	Hollywood, FL 33021
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lolita W. Snipes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/03

Date

407-230-5482

Daytime Phone #

CR2E034B (12/02)

Attachment 44009529
#P02000024038
ROMAN PUBLISHING INC.

goodgodamighty@bellsouth.net

Date: July 15, 2003

Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Dear Divisions of Corporations,

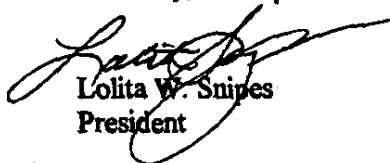
Thank you for sending the UBR in response to letter dated June 15, 2003. (See copy enclosed).

Because I never received the original forms and had no prior knowledge that there was an annual fee for forming a corporation, I am requesting a one-time waiver of the penalty amount for this filing. I have already mailed the filing fee of \$150.00 with the original letter dated June 15, 2003. Please accept this payment for this year for:

ROMAN PUBLISHING INC.
FEI # 03-0405476

Please send written confirmation that this is acceptable for this year as we will be aware of filing for future years regardless of whether or not the forms are actually received by us in the mail.

Sincerely,


Lolita W. Snipes
President