## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 31, 2005 8:00 am Secretary of State

DOCUMENT # P04000126235  1. Entity Name ROEMER ENTERPRISES, INC.					03-31-2005 90033 043 ***150.00					0.00	
Principal Place of Business Mailing Address											
2650 HAMBROWN ROAD		2650 HAMBROWN ROAD					-				
KISSIMMEE, FL 34740 US KISSIMMEE, FL 34740											
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2. Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03072005	Chg-P	CR2EC	34 (10/03)			
City & State		City & State				4. FEI Number 20 - 11	573783			plied For	
Zip	Country	Zip	Count	try			f Status Desired		\$8.75 Add	litional	
	6. Name and Address of Current	Registered Agent				7. Name and	Address of New Re	gistered			
				Name .							
SVEDJA, PAUL 7061 GRAND NATIONAL DRIVE SUITE 124				Street Address (P.O. Box Number Is Not Acceptable)							
ORLANDO, FL 32819											
Št. 1. J. in the state of the s				City	y FL Zip Code						
B. 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 of printed name of registered agent and title if applicable. (NOTE: Registered Agent algnature required when reinstating)  DATE											
9. Election Campaign Financing \$5.00 May Be											
FILE NOWILL FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees - Added to Fees -											
10.	OFFICERS AND		11.	··-		ADDITIONS/C	CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	
TITLE	PRES	☐ Delete	TITLE			1.5511101107	7.7.7.4.2.0 1.0 0.11	02.107.11	☐ Change	☐ Addition	
NAME	ROEMER, PETER		NAME	E					_ •	_	
STREET ADDRESS				STREET ADDRESS CITY-ST-ZIP							
C(TY-ST-Z)P			_						Channe		
TITLE NAME	ROEMER, JOKE	☐ Delete	TITLE						Change	Addition .	
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		STREI	ET ADDRESS			* *				
CITY-ST-ZIP	KISSIMMEE, FL 34740		CITY	-ST-ZIP							
TITLE.	TRES	☐ Delete	TITLE				A	_	Change	Addition	
NAME STREET ADDRESS	ROEMER, JOKE 2650 HAM BROWN ROAD		NAME STREE	ET ADDRESS							
CITY-ST-ZIP	KISSIMMEE, FL 34740			-ST-ZIP							
TITLE	SEC	☐ Delete	TITLE						Change	Addition	
NAME	ROEMER, PETER		NAME								
STREET ADDRESS CITY-ST-ZIP	2650 HAM BROWN ROAD KISSIMMEE, FL 34740			ET ADDRESS -ST-ZIP							
TITLE	1110011111122,1201110	☐ Delete	TITLE						☐ Change	☐ Addition	
NAME			NAME							1,20	
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CITY-ST-ZIP	·		-	-ST-ZIP					☐ Channe	☐ Addition	
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CITY-ST-ZIP .		gyphysikale e 19 m	СПҮ-	-ST-ZIP*							

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

03-25-05

407-935-0652

Daytime Phone #