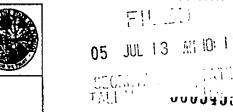
2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000157073

07-05-2005 90115 043 ***150.00 P04000157073



1. Entity Name ROMANINA FAMILY CORPORATION						1	5 JUL 13				
Principal Place of Business Malling Address					h	1	· (/. ij. i		, who		
34 RANSHIRE LANE PALM COAST, FL 32164			34 RANSHERE LANE PALM COAST, FL 32164			T			กุสถอง		
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			06302005	Chg-P	CR2E	034 (10/03)		
City & State			City & State			4. FEI Number 20 - 18	76286			plied For Applicable	
Zip Country		Zip				of Status Desired	٥	\$8.75 Add Fee Required			
8. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
PALMETTO CHARTER SERVICES, INC.			-		Name						
150 MAGNOLIA AVENUE DAYTONA BEACH, FL 32115-2491					Street Address (P.O. Box Number is Not Acceptable)						
		•			City			FI	Zip Code	9	
8. The above the obligat	named entitions of regis	y submits this statement for tered agent.	the purpose of changing its	registere	ed office or register	ed agent, or bo	th, in the State of Flo	xida, Lan	familiar with,	and accept	
SIGNATURE.	Signature, typed	or printed name of registered light)	nd trie il spolicable. (NOTE	Recustors	d Agent agrature require	o when rensenting)		DATE			
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.											
						.00 May Be led to Fees	In accordance v corporation did	vith s. 60 not recei	7.193(2)(b), l ve the prior r	F.S., the notice.	
			Trust Fund Contr			led to Fees	In accordance v corporation did	not recei	ve the prior r	otice.	
D 10. m.e	ue by Se j	OFFICERS AND	Trust Fund Contr	ibution.	Add	led to Fees	corporation did	not recei	ve the prior r	otice.	
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12. Thereby 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: _

AD TYPEDOR PRINTED NAME OF BIONERS OFFICER OR SIRECTOR

07.02.05 386.586-7152