

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P35734 (3)

1. Corporation Name

ROBERTS MANAGEMENT GROUP, INC.



Principal Place of Business

80 W WIEUCA RD
STE 302
ATLANTA GA 30342
US

Mailing Address

80 W WIEUCA RD
STE 302
ATLANTA GA 30342
US

2. Principal Place of Business

2a. Mailing Address

21 130 W. Wieuca Rd.

26 130 W. Wieuca Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 102 C

27 Suite 102 C

City & State

City & State

23 Atlanta Ga.

28 Atlanta Ga.

Zip

Zip

24 30342

29 30342

Country

Country

25 USA

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/02/1991

3a. Date of Last Report

05/01/1995

4. FEI Number

58-1960561

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. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0503, Florida Statutes.

SIGNATURE

Signature typed or printed in block letters (Last, first, middle initial) of the Registered Agent (signature required when appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
ROBERTS, STEPHEN E.
80 W WIEUCA RD STE 302
ATLANTA GA

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

Change Addition

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP

Change Addition

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY - ST - ZIP

Change Addition

13. TITLE
14. NAME
15. STREET ADDRESS
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17. TITLE
18. NAME
19. STREET ADDRESS
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21. TITLE
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25. TITLE
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33. TITLE
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71. STREET ADDRESS
72. CITY - ST - ZIP

Change Addition

73. TITLE
74. NAME
75. STREET ADDRESS
76. CITY - ST - ZIP

Change Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/96 44/851-1621

CR2E034 (12/95)