## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOG104

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## **FILED** Mar 13 1998 8:00am Secretary of State

1. Corporation ROMA	CORP, INC		7	(-)							
Principal Plac	e of Busines	s	Mailir	ng Address	<del></del> -		·		1 40011001 400 31101 10101 31010 15011 0161	BIBIH AHBIY AHBIH BIBIH	DIDIR BIELI METI
9304 FOREST LN. 9304 FOREST LN.											
STE. 200											
DALLAS TX 7 US	75243	DALLAS TX 75243 US					DO NOT WRITE IN THIS SPACE				
00			Ų.						3. Date Incorporated or Qualified 03/31/1992		
2. Principal F	Place of Busin	ness	2a. M	2a. Mailing Address					4. FEI Number		Applied For
21			26	26					75-2405063		Not Applicable
Suite, Apt.	#, etc.		Sc	Suite, Apt. #, etc.					5. Certificate of Status Desired		5 Additional
22			27	**************************************				-		Fee	Required
City & Stat	te			City & State					Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip Country			28	Zip Country					8. This corporation owes or has paid		
24	25			29 30			<del>-</del>		Personal Property Tax due June 3	,	□ No
		and Address of Curre		11					10. Name and Address of New Reg		
Ç.	T CORPORA	ATION SYSTEM				81	Name				
1200 SOUTH PINE ISLAND ROAD							Street A	ddres	s (P.O. Box Number is Not Acceptable	3)	
PLANTATION FL 33324							82 Street Addre			<del></del>	
			1								
-						84	City			FL 85 Z	ip Code
11. Purcuant	to the provisi	ions of Sections 607 050	12 and 607	1508 Florida Sta	dutes the a	boye	-named c	ornor	ation submits this statement for the nu		a its registered
office or a	registered ag	ent, or both, in the State	of Florida.	Such change w	as authorize	id by	the corpo	oration	ation submits this statement for the pun's board of directors. I hereby accept	the appointment	as registered
SIGNATURE	minan wi	tin, and accept the oblig	jations of, Si	ection 607.0505,	, riorida sta	เบเษร	١.				
	Signature, lyped	or printed name of registered ag-				d Age	ni signeture n	equired	when reinstating)	DATE	
TITLE	PD	OFFICERS AN	ID DIHECTO	DELETE	13.	(T) E	<del></del>		ADDITIONS/CHANGES TO OFFICE	Chang	
NAME	,	OBERT B			•		1			Chan	, Addition
STREET ADDRESS		REST LANE, STE. 20	)0				1.2 NAME 1.3 STREET ADDRESS				[8
CITY-ST-ZIP	DALLAS						1.4 CiTY-ST-ZIP				į
TITLE	VPS	<del></del>		DELETE	2.1 TI					Chang	e Addition C
NAME		DAVID G.			2.2 N	AME					,
STREET ADDRESS		Rest LN., Ste. 200			2.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	DALLAS	TX					T-ZIP				
TITLE	D	DT7 IAUCO V		DELETE	3.1 Ti					Chang	e Addition
NAME		rtz, James K 20 street			3.2 N						
STREET ADDRESS	PITTSBU						ADDRESS				
CITY-ST-ZIP	VPT	mu na		DELETE		TTY-S	T-ZIP			Chang	e Addition
TITLE	COOK, 1	TROY D		□ pereie	4.1 1)		- }			L URAN	le 🗀 Wooliooii
NAME :	720 W 2				4. 2 N		ADDRESS				]
City-St-ZIP	PITTSBU					(TY-S1					
TITLE				DELETE	5.1 Ti			-		Chang	B Addition
NAME					5.2 N/		[				
STREET ADDRESS							ADDRESS		_		
CITY-ST-ZIP						ITY-SI			-		
TITLE				DELETE	6.1 TI					Chang	e Addition
NAME					6.2 N/	AME					
STREET ADDRESS					6.3 S1	REET .	ADDRESS				ļ
CITY-ST-ZIP	L		···	<u></u>		TY-\$1					
14. I hereby o	certify that the	e information supplied w	ith this filinc	does not qualif	y for the exe	empt	ion stated	l in Se	ction 119.07(3)(i), Florida Statutes. I fu	rther certify that t	he information

indicated on this annual report or supplied matters ming does not quality for the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an adactment with an address.