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FILED  
Mar 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P92000006765 (1)

1. Corporation Name  
ROMNI INTERNATIONAL, INC.



Principal Place of Business  
1007 VALE ORCHARD LANE  
JACKSONVILLE FL 32207  
US

Mailing Address  
1007 VALE ORCHARD LANE  
JACKSONVILLE FL 32207-4298  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

SACKS, HARVEY  
1007 VALE ORCHARD LANE  
JACKSONVILLE FL 32207

3. Date Incorporated or Qualified  
11/19/1992

3a. Date of Last Report  
04/22/1996

4. FEI Number  
59-3157427

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

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 607.0505, Florida Statutes.

SIGNATURE

(Type or print the name of registered agent here, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SACKS, LAWRENCE J	
STREET ADDRESS	3300 COUNTY ROAD 13A, LOT J	
CITY-ST-ZIP	ST. AUGUSTINE FL 32092	
TITLE	P	<input type="checkbox"/> DELETE
NAME	SACKS, HARVEY	
STREET ADDRESS	1007 VALE ORCHARD LANE	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D, Sec.	<input type="checkbox"/> DELETE
NAME	Gerald J. Sacks	
STREET ADDRESS	1007 Vale Orchard Lane	
CITY-ST-ZIP	Jacksonville, Fl. 32207	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 this 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Harvey Sacks* Harvey Sacks, Pres 904 398 4177 3/20/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

Harvey Sacks, Pres.  
Moultrie Creek Landing LC  
1007 Vale Orchard Lane  
Jacksonville, Fl. 32207

Dear Div of Corporations , State of Florida

I am changing the mailing address of the Moultrie Creek Landing Corporation and need an application for filing for this year. A copy of the old one would be helpful as I don't have one or A blank one. Thank you. day phone 904 398 4177.

March 20, 1997

Very truly yours,

*Harvey Sacks*

\*\*\*\*\*5-DIGIT 32092  
NQ 59-2877843 DEC95 S07  
MOULTRIE CREEK LANDING LC  
3300 COUNTY RD 13A LOT J  
ST AUGUSTINE FL 32092

L I  
R  
S  
44

*old address*