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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000011153

1. Corporation Name

ROGER AND SONS GENERAL CORP.

Principal	Pla	ce of	Busines
8136 SW	152	PL.	

Mailing Address

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90103 027 ***150.00



Thidpar Floor of Edomices							
8136 SW 152 PL. Miami Fl 33193	8136 SW 152 PL. MIAMI FL 33133		DO NOT WRITE IN THIS SPACE				
			3, Date Incorporated or Qualifed 02/12/1993				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For			
	26		65-0388717	Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country	Zip C 29 30	ountry	This corporation owes the current year Ir Personal Property Tax.	ntangible			
9. Name and Address of Curr			10. Name and Address of New Registered	1 Agent			
TOMAS, ROGER R		81 Name					
8136 SW 152 PL.		82 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL 33193		83					
		84 City	FI	85 Zip Code			
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli 	te of Florida. Such change was authoriz	zed by the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appo	of changing its registered pintment as registered			

-30	,,						J		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.			13.	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition		
NAME	TOMAS, ROGER R		1.2 NAME		•		ļ		
STREET ADDRESS	8136 SW 152 PL.		1.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP						
TITLE	VP	☐ DELETE	2.1 TITLE			Change	☐ Addition		
NAME	TOMAS, ROGER REGOR		2.2 NAME				Ç		
STREET ADDRESS	8136 SW 152 PL.		2.3 STREET ADDRESS				ļ		
CITY-ST-ZIP	MIAMI FL.		2.4 CITY+ST-ZIP						
TITLE	SEC	☐ DÉLETE	3.1 TITLE			Change	Addition		
NAME (TOMAS, ROGER RONAN PA		3.2 NAME						
STREET ADDRESS	8136 SW 152 PL.		3.3 STREET ADDRESS				ļ		
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition		
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP		<u> </u>	4.4 CITY-ST-ZIP	~ ~ ~					
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition		
NAME			52 NAME				ļ		
STREET ADDRESS			.5.3 STREET ADDRESS	•	-				
CITY-ST-ZIP		<u> </u>	5.4 CITY+ST-ZIP		U10				
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition		
NAME			6.2 NAME .	•					
STREET ADDRESS		•	6.3 STREET ADDRESS			•			
CITY-ST-ZIP			6.4 CITY-ST-ZIP						

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 the corporation or the receiver or trustee ampowered 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, with all other like empowered.

SIGNATURE