


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

FILED

Feb 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000034995 (9)

1. Corporation Name
ROASTERS CORP.

Principal Place of Business
899 WEST CYPRESS CREEK RD
SUITE 500
FT LAUDERDALE FL 33309
US

Mailing Address
899 WEST CYPRESS CREEK RD
SUITE 500
FT LAUDERDALE FL 33309-2064
US



3. Date Incorporated or Qualified 05/14/1993
3a. Date of Last Report 02/20/1996

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 65-0410705 5. Certificate of Status Desired <input type="checkbox"/> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent

BARNETT, CHARLES D
899 WEST CYPRESS CREEK RD
SUITE 500
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CDP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BROWN, JOHN Y JR	1.2 NAME	THOMAS E. METZGER
STREET ADDRESS	899 WEST CYPRESS CREEK RD., STE 500	1.3 STREET ADDRESS	899 W. CYPRESS CREEK RD, Ste 500
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33309
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHARLES D. BARNETT,	2.2 NAME	
STREET ADDRESS	899 WEST CYPRESS CREEK RD., STE 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	EVPD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	EVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREGORY G.DOLLARHYDE,	3.2 NAME	RALPH SLIVKA
STREET ADDRESS	899 WEST CYPRESS CREEK RD., STE 500	3.3 STREET ADDRESS	899 W. CYPRESS CREEK RD, Ste 500
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	FT LAUDERDALE, FL 33309
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHRISTIAN F. HORN,	4.2 NAME	
STREET ADDRESS	20300 STEVENS CREEK BLVD. #330	4.3 STREET ADDRESS	
CITY-ST-ZIP	CUPERTINO CA 95014	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DREW LEWIS,	5.2 NAME	K. P. TAN
STREET ADDRESS	8TH AND EATON	5.3 STREET ADDRESS	30 JALAN SULTAN ISMAIL
CITY-ST-ZIP	BETHLEHEM PA 18018	5.4 CITY-ST-ZIP	KUALA LUMPUR, MALAYSIA
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUN, VINCENT TAN CH	6.2 NAME	
STREET ADDRESS	30 JALAN SULTAN ISMAIL	6.3 STREET ADDRESS	
CITY-ST-ZIP	MALAYSIA	6.4 CITY-ST-ZIP	

14. I do 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 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 *Charles D Barnett* Charles D Barnett 2/1/97 954938-0330

CR2E034 (9/96)