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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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May 14 1997 8:00am

Secretary of State

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4-30-97 Daytime Phone .

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000039559 (8)

ROLLINEX, INC.

Principal Place of Business Mailing Address 3221 SOUTHWEST 142ND AVENUE 3221 SOUTHWEST 142N				AVENUE				
SUITE 1 SUITE 1			1			·		
MIAMI FL 33175 US	5	Miami FL 3 US	MIAMI FL 33175-6728 US			3. Date Incorporated or Qualified 3a. Date of Last Report 05/28/1993 05/01/1996		
2. Principal Pla	ace of Business	2a. Mailing	Address			4. FEI Number		Applied Fo
21		26				65-0414904		Not Applica
Suite, Apt #	#, etc.	Suite, A	ipt. #, etc.			5. Certificate of Status Desired	1 1 7 7 7	75 Additiona se Regulred
City & State		City & S	State			6. Election Campaign Financing		.00 May Be
23		28				Trust Fund Contribution		ded to Fees
Zφ	Country	Zip		Count	try	8. This corporation has liability for i	ntangible tax un	der s. 199.032
24	25	29		30			Yes No	
	9. Name and Address of Cur	rrent Registered Ag	gent	8	1 Name	10. Name and Address of New Reg	gistered Agent	
	ARES, RAFAEL			ľ	Piame			
	I SOUTHWEST 142 AVENUE VII FL 33175		•	8	2 Street Ad	dress (P.O. Box Number is Not Acceptab	le)	
(WILLIAM)	WITE GOLLA			8	3			
				8	4 City		Tael	Zip Code
)	1 - 1		FL I	,
office or re agget 1 ar	egistered agent, or both, in the Si in familiar with, and accept the ot	tate of Florida. Such bligations of, Section	, rionoa statui change was n 607 0505. Fi	es, me auc authorized orida Statul	by the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	of the appointme	nt as registere
		-						
SIGNATURE	Signature, typed or printed namer of registered					quired when rainstaling)	DATE	
SIGNATURE	Signature, typicd or printed name of registered OFFICERS		e. (NO				ERS AND DIREC	
SIGNATURE	Signature, lybed or probotration of registerer OFFICERS	d agent and title. Lapp icable		E: Registered A	Agent signature rec	quired when reinstaling)		
SIGNATURE 12. TIME	Signature, lyned or probadication of hapstered OFFICERS PD TAVARES, SILVIA	d agent and title 1 applicable AND DIRECTORS	e. (NO	E: Registered A	Agent signature rec	quired when reinstaling)	ERS AND DIREC	
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