## 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 # P93000056597

ROTAG PLUS, INC.

Principal Place of Business

Mailing Address

## **FILED** Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90070 048 \*\*\*150.00



FT MYERS FL 33907 US		WAUKESHA WI 53186	WAUKESHA WI 53186		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
	-			08/09/1993			
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number		Applied For	2
21		26	26			Not Applicable	25
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		65-0475800 5. Certificate of Statu	ie Decired		P
22		27		S. Scrindato of State		ee Required	
City & State	e	City & State		6. Election Campaig		5.00 May Be	
23		28		Trust Fund Contri	bution A	dded to Fees	
Žip	Country	Zip	Country	•	owes the current year Intangible v Tax.		
24	25		30	Personal Property	ess of New Registered Agent		
	9. Name and Address of Curr	ent Registered Agent	81 N	ame	esa or new registered Agent		
MFIN	NICK, GREGORY E						
9385 N 56TH STREET			LL				
	E 301		83				
TEMF	PLE TERRACE FL 33617		<b>84</b> C	ity 27 St. Use of	27 (4) \$1 79 94 (274 (274 (274 (274 (274 (274 (274 (27	Zip Code	
11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the Sta im familiar with, and accept the obli	502 and 607.1508, Florida Statute te of Florida. Such change was au gations of, Section 607.0505, Flori	l s, the above-na thorized by the da Statutes.	med corporation submits this state corporation's board of directors. I	• • •	ng its registered as registered	
agent. I ai	•						
SIGNATURE				nature required when reinstalling 1	DATE		_
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE: f		nature required when reinstating)	DATE IGES TO OFFICERS AND DIR	ECTORS IN 12	(80)
signature	Signature, typed or printed name of registered a		Registered Agent sign	ADDITIONS/CHAN	DATE  IGES TO OFFICERS AND DIR		
SIGNATURE  12. TITLE	Signature, typed or printed name of registered a OFFICERS of	ogent and title if applicable. (NOTE: f	Registered Agent sign		IGES TO OFFICERS AND DIR		(A) (11/0B)
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered a OFFICERS CPT GAYLOR, GARY L.	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE	Registered Agent sign 13. 1.1 TITLE	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR		
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered of OFFICERS COFFICERS CO	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR		
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered a OFFICERS of CPT GAYLOR, GARY L. N26 W22165 GLENWOOD LAWAUKESHA SI	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIF	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS	ogent and title if applicable. (NOTE: I AND DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIF	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 2.1 TITLE 2.2 NAME 2.3 STREET ADC	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  ANE  DELETE  ANE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZIF	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  ANE  DELETE  ANE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZII 3.1 TITLE	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
Agent. Tai SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  ANE  DELETE  ANE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZII 3.1 TITLE 3.2 NAME	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
Agent. Tai SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable. (NOTE: I AND DIRECTORS  DELETE  ANE  DELETE  ANE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZII 3.1 TITLE 3.2 NAME 3.3 STREET ADC	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
Agent. Tai SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS	agent and title if applicable (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZII 3.1 TITLE 3.2 NAME 3.3 STREET ADC 3.4 CITY-ST-ZII 3.4 CITY-ST-ZII	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	agent and title if applicable (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZII 3.1 TITLE 3.2 NAME 3.3 STREET ADC 3.4 CITY-ST-ZII 4.1 TITLE	ADDITIONS/CHAN	IGES TO OFFICERS AND DIR	nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	agent and title if applicable (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent sign  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADC  1.4 CITY-ST-ZIF  2.1 TITLE  2.2 NAME  2.3 STREET ADC  2.4 CITY-ST-ZII  3.1 TITLE  3.2 NAME  3.3 STREET ADC  3.4 CITY-ST-ZII  4.1 TITLE  4.2 NAME	ADDITIONS/CHAN  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR	nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	agent and title if applicable (NOTE: I AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZIF 3.1 TITLE 3.2 NAME 3.3 STREET ADC 3.4 CITY-ST-ZIF 4.1 TITLE 4.2 NAME 4.3 STREET ADC	ADDITIONS/CHAN  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR	nange Addition  nange Addition  nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent sign  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADC  1.4 CITY-ST-ZIF  2.1 TITLE  2.2 NAME  2.3 STREET ADC  2.4 CITY-ST-ZIF  3.1 TITLE  3.2 NAME  3.3 STREET ADC  3.4. CITY-ST-ZIF  4.1 TITLE  4.2 NAME  4.3 STREET ADC  4.4 CITY-ST-ZIF  4.3 STREET ADC  4.4 CITY-ST-ZIF  4.4 CITY-ST-ZIF	ADDITIONS/CHAN  ORESS  ORESS  ORESS	IGES TO OFFICERS AND DIR  □ Ch □ Ch	nange Addition  nange Addition  nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent sign  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADC  1.4 CITY-ST-ZIF  2.1 TITLE  2.2 NAME  2.3 STREET ADC  2.4 CITY-ST-ZIF  3.1 TITLE  3.2 NAME  3.3 STREET ADC  3.4 CITY-ST-ZIF  4.1 TITLE  4.2 NAME  4.3 STREET ADC  4.4 CITY-ST-ZIF  5.1 TITLE	ADDITIONS/CHAN  PRESS  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR  □ Ch □ Ch	nange Addition  nange Addition  nange Addition	
Agent. I at SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZIF 3.1 TITLE 3.2 NAME 3.3 STREET ADC 3.4 CITY-ST-ZIF 4.1 TITLE 4.2 NAME 4.3 STREET ADC 4.4 CITY-ST-ZIF 5.1 TITLE 5.2 NAME	ADDITIONS/CHAN  PRESS  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR  □ Ch □ Ch	nange Addition  nange Addition  nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZIF 3.1 TITLE 3.2 NAME 3.3 STREET ADC 3.4 CITY-ST-ZIF 4.1 TITLE 4.2 NAME 4.3 STREET ADC 4.4 CITY-ST-ZIF 5.1 TITLE 5.2 NAME 5.3 STREET ADC	ADDITIONS/CHAN  PRESS  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR  □ Ch □ Ch	nange Addition  nange Addition  nange Addition  nange Addition	
Agent. I at SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	AND DIRECTORS  DELETE  ANE  DELETE  DELETE  DELETE	Registered Agent sign  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADC  1.4 CITY-ST-ZIF  2.1 TITLE  2.2 NAME  2.3 STREET ADC  3.4 CITY-ST-ZIF  3.1 TITLE  3.2 NAME  3.3 STREET ADC  3.4 CITY-ST-ZIF  4.1 TITLE  4.2 NAME  4.3 STREET ADC  4.4 CITY-ST-ZIF  5.1 TITLE  5.2 NAME  5.3 STREET ADC  5.4 CITY-ST-ZIF  5.5 NAME  5.6 CITY-ST-ZIF  5.7 STREET ADC  5.8 CITY-ST-ZIF  5.9 NAME  5.9 STREET ADC  5.4 CITY-ST-ZIF  5.4 CITY-ST-ZIF  5.5 NAME	ADDITIONS/CHAN  PRESS  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR	nange Addition  nange Addition  nange Addition  nange Addition	
Agent. I all SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered a OFFICERS.  CPT GAYLOR, GARY L. N26 W22165 GLENWOOD L/WAUKESHA SI VS GAYLOR, CAROLYN M. N26 W22165 GLENWOOD L/WAUKESHA WI	AND DIRECTORS  DELETE  ANE  DELETE  DELETE  DELETE	Registered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADC 1.4 CITY-ST-ZIF 2.1 TITLE 2.2 NAME 2.3 STREET ADC 2.4 CITY-ST-ZIF 3.1 TITLE 3.2 NAME 3.3 STREET ADC 3.4 CITY-ST-ZIF 4.1 TITLE 4.2 NAME 4.3 STREET ADC 4.4 CITY-ST-ZIF 5.1 TITLE 5.2 NAME 5.3 STREET ADC 5.4 CITY-ST-ZIF 6.1 TITLE	ADDITIONS/CHAN  PRESS  PRESS  PRESS  PRESS	IGES TO OFFICERS AND DIR	nange Addition  nange Addition  nange Addition  nange Addition	

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 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 addressy with all other like empowered.

SIGNATURE: