

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

FILED
Feb 04 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 # P94000012053 (2)
 1. Corporation Name
ROWAN EXPORT COMPANY, INC.



Principal Place of Business 7077 LAKEWORTH RD. LAKE WORTH FL 33467	Mailing Address 7077 LAKEWORTH RD. LAKE WORTH FL 33467-2904
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3. Date Incorporated or Qualified 02/08/1994		3a. Date of Last Report 05/01/1996	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		4. FEI Number 65-0570786 Applied For Not Applicable	
2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
29		30	

9. Name and Address of Current Registered Agent SALAMEH, MOHAMMED 21164 ESCONDIDO WAY BOCA RATON FL 33433				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
				85 Zip Code		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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SALAMEH, MOHAMMAD S		1.2 NAME	
STREET ADDRESS 7077 LAKEWORTH RD.		1.3 STREET ADDRESS	
CITY - ST - ZIP LAKEWORTH FL 33467		1.4 CITY - ST - ZIP	
TITLE VP	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME NASR, EZDEEN		2.2 NAME	
STREET ADDRESS 2116 ESCONDIDO WAY		2.3 STREET ADDRESS	
CITY - ST - ZIP BOCA RATON FL		2.4 CITY - ST - ZIP	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MUSSALLAM, MAHMOUD		3.2 NAME	
STREET ADDRESS 70747 LAKEWORTH RD.		3.3 STREET ADDRESS	
CITY - ST - ZIP LAKEWORTH FL 33467		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: _____ **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**
 Date: **1/28/97** Daytime Phone #: **954 972 8274**

CR2E034 (9/96)