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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000014946 (5)

ROLLER STAR CORPORATION

	MCNAB ROAD EACH FL 33089	1943 WEST MCNAI POMPANO BEACH				Date Incorporated or Qualified	3a. D	ate of Last Re	eporl
<u> </u>						02/23/1994	05/1996		
<u> </u>	Place of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26	26			65-0470028 Not App			1 Applicabl
Sulte, Ap	ot. #, etc.	Suite, Apt #, i	Suite, Apt #, etc.			5. Certificate of Status Desired	RY_	\$8.75 A	
22		27				Fee			quired
City & St	tate	City & State			Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip		ountry		8. This corporation has liability for i			199.032,
24 25 29			30	η.		Florida Statutes Yes No			
g, Name and Address of Current Registered Agent						10. Name and Address of New Re	gistered	Agent	
CECCOFIGLIO, DAVID 5484 NE 3 TERRACE				81	Name				
				82	82 Street Address (P.O. Box Number is Not Acceptable)				
FT	LAUDERDALE FL 33334						······································		
				83					
					City		FL	85 Zip (
11, Pursuar office o agent.		502 and 697,1508, Floridate of Florida. Such changing tight of, Section 607.0	a Statutes, the ge was authoriz 505, Florida St	above ed by atutes	e-named cor the corpora s.	poration submits this statement for the particular submits the statement for the particular submits the submits th	urpose on the app	changing its sointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Fiegiste	red Age	nt signature requ	ired when reinstating)	DATE		-/ -
12.	OFFICERS A	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	
TITLE	P	☐ DELETE		TITLE		☐ Change ☐			Addilio
NAME 🔪	OTI RUIZ, JAMIE		1,2	NAMÉ	1	÷			
STREET ADDRES				1.3 STREET ADDRESS					
CITY-ST-ZIP	76970 ALACUAS VALENCIA SPAIN			1.4 CITY-S1-ZIP					
TITLE	ST	DELETE 211		TITLE		☐ Change ☐ Ad			☐ Additio
NAME	OTI RUIZ, FRANCISCO		2.2 NA			•			
STREET ADDRESS	ESS AV GENOVES, 24-9			STREET	ADDRESS				
CITY-ST-7IP	P 76970 ALACUAS VALENCIA SPAIN			2 4 City-ST-7IP					

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. Just the 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 inder oath; that I am an officer or director of the corporation or the receiver or trustee ompowered 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.

3.1 TITLE

4.1 TITLE

4. 2 NAME

51 TITLE

5.2 NAME

6.1 THLE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 C(1Y-ST-ZIP

4.4 CITY-ST-ZIP

3.4. C(TY - ST - ZIP

CICNATURE

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-\$1-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

OTI RUIZ, FRANCISCO

MORAGUES, BERNARDO

76970 ALACUAS VALENCIA SPAIN

76970 ALACUAS VALENCIA SPAIN

CALLE MANISES, 3

CALLE MANISES, 5

TAME OFT PINE

DELETE

DELETE

DELETE

DELETE

5-5-97

(1)

Change

Change

Change

Change

Addition

Addition

Addition

Addition

FILED

Jun 05 1997 8:00am

Secretary of State