FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000047814 (6)

ROCKWELL REAL ESTATE & DEVELOPMENT CORP.

Principal Place of Business Mailing Address

2420 N. ANDREWS AVENUE EXT.. #200
POMPANO BEACH FL 33064 POMPANO BEACH FL 33064



, 0417340	DENOTITE 33004	•	COMPANO BEACH F	L 33Ub4							
- D: : : =		-						Date Incorporated or Qualified 06/27/1994	3a. Date		t Report /1995
	ace of Business	2a. M	lailing Address				4.	, FEI Number			Applied For
								65-0501052		<u></u> [Not Applicable
Suite, Apt. #, etc.			Suite Apt. #, etc I				5.	Certificate of Status Desired	ΓΊ		75 Additional
City & State	2	27	ity & State						L-I		e Required
23	-	28	ity & States				6.	Election Campaign Financing	П		.00 May Be
Zip	Country		p	Cou	intry			Trust Fund Contribution			ded to Fees
24	25	29	•	30			6.	This corporation has liability for Florida Statutes	intangible ta 3. No	x under	s 199.032,
	g, Name and Address of Curre	nt Register	ed Agent	1441	Γ		10.	Name and Address of New I	_	Agent	
					81	Name					
ANDREWS, THOMAS J 2420 N. ANDREWS AVENUE EXT., #200					82		, ,n	0 0- N -6- 2 N -6			
					62	Street Add	reet Address (P.O. Box Number is Not Acceptable)				
	ANO BEACH FL 33064				83	· ·	· · · · · · · · · · · · · · · · · · ·				
					84	City			FL	85	Zip Code
	to the provisions of Sections 607.050 ed agent, or both, in the State of Floring and accept the obligations of Section and Accept the obligation accept the obligation and accept the obligation accept the obligation and accept the obligation and accept the obligation accept the obligation and accept the obligation and accept the obligation and accept the obligation accept the obligation accept the obligation accept the obligation and accept the obligation a			s, the abo d by the c	ve r	named corpo oration's boa	bration s ard of di	submits this statement for the purifications. I hereby accept the app	rpose of cha	inging it register	s registered office red agent. Lan:
SIGNATURE	in the docupt the dollyations of disc	ACOLYCO FICH	ю, гюноа о дациев							-	
	Signature, typed or printed name of registered agree			E Registered	Agen	signature requir	red where re	enstatings	DATE		
12. TITLE	OFFICERS AF	ND DIRECTO		13.			do	ADDITIONS/CHANGES TO OFF			
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	POMPANO BEACH FL 330		200			ADDRESS					
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I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as it made under oath; that I am an officer or director of the scriporation or the receiver or trustoe empowered to execute this report as required by Chapter 607. Florida Statuter, and that my name appears in Block 12 or Block 13 if changed, or on an all adjuster with an address.

SIGNATURE:

GATURE AND TYPEO OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

13/95

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