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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

. Corporation Name	F34000030010	(1)					
RORABAUGH INVESTMENTS, INC.							

Principal Place of Business 1060 S. STATE RD. 7

Mailing Address

1060 S STATE RD 7



HOLLYWOOD FL 33023		HOLLYWOOD FL 33023				·			
						3. Date incorporated or Qualified 12/12/1994	3a. Date	of Last F	
2. Principal Pla	nce of Business	2a. Mailing Address				4. FEI Number	•		Applied For
)			26			65-0541054			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22					5. Certificate of Status Desired See Requir				
City & State	City & State City & State 28			6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees					
Zip	Country	Ζιp	Cour	ntry		8. This corporation has liability for		cunder s	199.032,
24	[25]	29	30		,	Florida Statutes 😾 Ye			
	9. Name and Address of Curren	r Registered Agent		81	Name	10. Name and Address of New	Hegistered A	gent	
DADAD	MICH VENNETH D				Namo				
	BAUGH, KENNETH P S. STATE RD. 7		[82	Street Address	ss (P.O. Box Number is Not Accepta	ble)		
	. STATE ND. 7 WOOD FL 33023		-	В3					
HULLIY	WOOD FL 33023]						
			1	B4	City		FL	85 Z	ip Code
11 Pursuant to	o the provisions of Sections 607 0500	and 607 1508 Florida Statute	os the abov	<u></u>	mod corporat	ion cultimite this statement for the s		L L	registered office
or registere familiar with SIGNATURE	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	la. Such change was authorizi on 607.0505, Florida Statutes	ed by the c	orpor	ration's board	of directors. I hereby accept the app	xointment as i	egistere	d agent. I am
	Skyr at tree, typical or printed name of registered agents			Ag-xit s	signature required w		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF			
TULE	DODADALIOU VENNETU	DELETE	1 1 TII		Se	cratary ,	_] Change	Addition
NAME	RORABAUGH, KENNETH		1 2 NA		13º	rabough , Paulin	c		
SPREED ADDRESS	1060 S. STATE RD. 7				DDRESS / O	60 5. State Rd 7 llywood, F1 3302	,		
C-1Y - \$1 - 7-P	HOLLYWOOD FL 33023	E1 pricte	1.4 CIT		ZIP HO	Hywood, FI 350L	<u> </u>	2.05	<u> </u>
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STREET ADDRESS					DDRESS				
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NAME			3.2 NAI		ł		L	j onange	☐ Addition
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STREET ADDRESS					DDRESS				
City-St-ZiF					1				
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NAM:		<u></u>	5.2 NA				_	3.15.190	
STREET ADDRESS			1		DDRESS				
CITY \$1 ZIP			5.4 CIT		1				
TIFLE		[] DELETE	6 1 TIT				Г] Change	Addition
NAME			6.2 NA				<u> </u>		
STREET ADORESS					DORESS				
CITY-ST ZIP			6 4 CIT						
	v certify that the information supplied v	vith this filing is voluntarily furn				the exemption stated in Section 119	.07(3)(k). Flor	ida Stah	ites. 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 earlit; 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.

954-963-3882