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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000025712 (7)

THEODORE ROUX, CORP.

Principal Place of Business

officer or director of the corpo Block 12 or Block 13 if chang

Mailing Address

## FILED Apr 16 1998 8:00am Secretary of State



116 GIRALDA AVENUE 116 GIRALDA AVENUE CORAL GABLES FL 33134 CORAL GABLES FL 33134 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/31/1995</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0568438 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROLLNICK ROSEN LINDEN STEINMAN & LEVY P.A. 3500 INTERNATIONAL PLACE 82 Street Address (P.O. Box Number is Not Acceptable) 100 SE 2ND STREET 83 **MIAMI FL 33131** 84 City Zip Code 11. Pureuant 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) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITI F 1.1 TITLE ROUX, THEODORE L R2E034 NAME 1.2 NAME 116 GIRALDA AVENUE STREET ADDRESS 1.3 STREET ADDRESS **CORAL GABLES FL 33134** CITY-ST-ZIP 1.4 CITY - ST - ZIF DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition 3.1 T(TL€ NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS upplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information plemental annual open is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an attachment with an address. CITY-ST-ZIP 14. I hereby certify that the informindicated on this annual ropo

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