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

CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Apr 29 1997 8:00am

Secretary of State

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DOCUMENT # P95000049999 (2)

ROSSMANN & ASSOCIATES, INC.

Principal Place of Business Mailing Address								
ESTO RODMAN ST			Mailing Address 2510 RODMAN ST					
HOLLYWOOD F	FL 33020	H	DLLYWOOD FL 33020-5	848				
: 						3. Date Incorporated or Qualified 06/26/1995	3a. Date of Last Report 07/19/1996	
	2. Principal Place of Business		2e. Mailing Address			4. FEI Number 65-0592504	Applied For Not Applicable	
21 Suite, Apt. #, etc.		26	Suite, Apt. #, etc.			60.75 Autilianus		
22		27				5. Certificate of Status Desired Fee Required		
City & State		-	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution		
Zip Country			Zip Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199,032.		
24	25		30		Florida Statutes Yes No			
	9, Name and Address	s of Current Regis	lered Agent			10. Name and Address of New Reg	istered Agent	
ROSSI, DONNA 2510 RODMAN ST HOLLYWOOD FL 33020				81 82 83	Street Add	Address (P.O. Box Number is NoI Acceptable)		
			84 City		■■ 85 Zip Code			
					l	A-1/4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	FL	
11. Pursuant office or r agent I a	to the provisions of Secti registered agent, or both, im familiar with, and acco	ons 607.0502 and 6 in the State of Flori pLthe obligations o	07.1508, Florida Stati da. Such change was f, Section 607.0505, f	utes, the above authorized b Florida Statuto	re-named co by the corpori is.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changin t the appointment	ng its registered Las registered
SIGNATURE	Signature, typed or printed name	ol registered agent and title	- парржавіс (NC	AL Registered Ag	ornt signature req	uired whon reinstating)	DATE	
12.		FICERS AND DIRE	CTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PSD DOLLAR		☐ DELETE	1.1 THLE			☐ Chan	ge 🔝 Addition
NAME	ROSSI, DONNA 2510 RODMAN ST			1.2 NAME				
STREET ADDRESS CITY-ST-ZIP	HOLLYWOOD FL 33	020			I ADDRESS			
TITLE	VD		DELETE	1.4 CITY- 2.1 TITLE	51-715	· · · · · · · · · · · · · · · · · · ·	Chan	ge Addition
NAME	WEIDMANN, JENNIN	Æ		2 2 NAME				:
STREET ADDRESS	1108 SW 22 AVE			2 3 STREE	1 ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL	. 33312	المستوري والمراجع والمتاريخ	2 4 City	ST-7)P			
TITLE			DELETE	3 1 11TLE			L Chan	ge 🔲 Addition
NAME				32 NAME	LADDOLOG			
STREET ADDRESS CITY-ST-ZIP				33 STREE 34, City	L ADDRESS			
TITLE			DEFETE	4.1 11111	OI LIF		☐ Chan	ge Addition
NAME				4. 2 NAMI				-
STREET ADDRESS				4 3 STREE	T ADDRESS			
CITY-ST-ZIP				4.4 CITY-	S1 - ZiP			
TITLE			☐ DELETE	5 1 TITLE			Chan	ge Addition
NAME				52 NAME				
STREET ADDRESS				5 3 STREE	1 ADDRESS			
CITY-ST-ZIP			DELESE	5.4 City-	ST-ZIP			
TITLE			☐ DELETE	6.1 TITLE			☐ Chan	ge L_ Addition
NAME CYDEET APPROCES				62 NAME				

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 tam an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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 poration or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name shanged, or on an additional with an address.