

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

1-2

DOCUMENT # P95000069037

1. Corporation Name

ROMAN SUPPLY, INC.

Principal Place of Business

Mailing Address

3400 S.W. 26TH TERRACE
FT. LAUDERDALE, FL 33312

3. Date Incorporated or Qualified

3a. Date of Last Report

9/7/95

2. Principal Place of Business

2a. Mailing Address

21 2875 NE 191 ST

26 2875 NE 191 ST

4. FEI Number

☒ Appraisal Fee
☐ Not Applicable

22 Suite Apt # etc

27 Suite Apt # etc

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 City & State SUITE 603

28 City & State SUITE 603

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip 33180

Country

29 Zip 33180

Country

8. This corporation has liability for intangible tax under s. 197.032
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOE CASACCI
305 S.E. 18TH COURT
FT. LAUD., FL 33316

81 Name JOANNE C. HIMMEL

82 Street Address (P.O. Box Number is Not Acceptable)

83 2875 NE 191 ST. SUITE 603

84 City AVENTURA FL 85 Zip Code 33180

11. Pursuant 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

5/10/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/D	NAME JOANNE C. HIMMEL	<input type="checkbox"/> DELETE
STREET ADDRESS	2875 NE 191 ST. SUITE 603	
CITY, ST, ZIP	AVENTURA, FL	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	NAME	
CITY, ST, ZIP	NAME	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	NAME	
CITY, ST, ZIP	NAME	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	NAME	
CITY, ST, ZIP	NAME	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	NAME	
CITY, ST, ZIP	NAME	

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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14. 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)(f), 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 oath; 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-I changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOANNE C. HIMMEL 5/10/96 305-933-1222
PRESIDENT

CR2E034 (12/95)

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ARTICLE IX - INITIAL DIRECTORS

The name and post office addresses of the members of the first board of directors, who, unless otherwise provided by the by-laws of this corporation, shall hold office and manage the corporation for the first year of existence of the corporation, or until their successors are elected or appointed and have qualified, are as follows:

NAME:

ADDRESSES:

JOANNE C. HIMMEL

3400 S.W. 26th Terrace
Fort Lauderdale, Florida 33312

MATINA CONSTANTINE

3400 S.W. 26th Terrace
Ft. Lauderdale, Florida 33312

ARTICLE X - INCORPORATOR(S)

The name and post office address of the incorporator(s) of these Articles of Incorporation is/are as follows:

NAME:

ADDRESSES:

JOSEPH R. CASACCI

305 Southeast 18th Court
Fort Lauderdale, Florida 33316
(305) 525-9401

ARTICLE XI - TRANSACTIONS OF INTERESTED DIRECTORS

In the event that the corporation enters into contracts or transacts business with one or more of its directors, or with any firm of which one or more of its directors are members or employees, or with any other corporation or association of which one or more of its directors are shareholders, directors, officers, or employees, such contract shall not be invalidated or in any way affected by the fact that such director or directors have or may have interests therein which might be adverse to the interests of the corporation, even though the vote for the director or directors having such adverse