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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000097236 (0)

G. ROMAN, INC.

Mailing Address Principal Place of Business 2166 NORTHEAST 57TH ST. 2166 NORTHEAST 57TH ST. FT. LAUDERDALE FL 33308-2528 FT. LAUDERDALE FL 33308 3a. Date of Last Report 3. Date Incorporated or Qualified 12/27/1995 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0635528 Not Applicable 26 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Ζıp Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No 2ip Country Yes 29 30 Florida Statutes No 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GILBERTSON, STEPHEN W 2200 N.E. 26TH ST. Street Address (P.O. Box Number is Not Acceptable) WILTON MANORS FL 33305 83 84 City Zip Code 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 will, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DPST DELFTE Addition THLE 1.1 TITLE ROMAN, GEORGE 1.2 NAME NAME 2166 NORTHEAST 57TH ST. 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33308 CITY - ST - ZIP 1.4 CiTY - ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE THLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS C(1Y+S1-2)P 4.4 CITY - ST - ZIP Addition DELETE 51 TITLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIF Change Addition DELETE ItI1E 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. 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 oath; that I am an officer or director of the corporation or the receiver or truetee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

I am an officer or director of the corporation or appears in Block 12 or Block 13 if changed, a

C(7Y+S1+7)P

on an attachment with an address.

964-179-2616

FILED

Feb 05 1997 8:00am

Secretary of State