## 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 # P9600003393 (1)

ROGO, INC.

Mailing Address

FILED Jan 21 1998 8:00am Secretary of State



Principal Place	of Business	Ma	Mailing Address											
5722 S.W. 8TH STREET			5722 S.W. 8TH STREET											
MIAMI FL 33134			MIAMI FL 33134						DO NO.	F ) 4 (C) (T) F (1)		DAGE		
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							3. 1		oorated or Qu	anned				
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2. Principal Place of Business			2a. Mailing Address					El Numbe					-	ed For
21			26					<u>65-063</u>	<u> </u>					pplicable
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City & State			<b>⊢</b> , '				t t		mpaign Finat		П		<b>00</b> ма	
23			Zip Country						Contribution		ऱ		ed to F	
Zip	Country		<del></del>			,			ration owes or	,				· .
24	9. Name and Address of Current		29 30						roperty Tax d			Yes		10
	<del></del>	t Regis	tered Agent		81	Nam		Name and	Address of	vew nega	stered A	gent		
	FABIO, GEORGE J	_			"	ivair	rie .							
2121 PONCE DE LEON BOULEVARD			<b>82</b> Str			Stre	eet Address (P.O. Box Number is Not Acceptable)							
SUITE 430											<del></del>			
CORAL GABLES FL 33134														
					84	City	<del></del> _		<del></del>	·	1	85 2	ip Coc	ie l
											FL	1	•	
11. Pursuant t	o the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	and 60	07.1508, Florida Statut	es, the a	pove	e-name	ned corporation	submits th	is statement	or the pur	pose of	changin	g its re	gistered
agent I ar	n familiar with, and accept the obliga	itions of	i, Section 607.0505, Flo	orida Sta	tutes	y the c s.	corporations be	ard of dire	ctors, i nerec	y accept	ine appo	munienc	as reg	istered
SIGNATURE	• -										1			}
	Signature, typed or printed name of registered ager			E. Registere	d Age	ent signat	ature required when re				DATE			
12,	OFFICERS AND	DIREC		13.			Al	DDITIONS/	CHANGES TO	OFFICE	<del></del>			
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NAME								•				•		J
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CITY - ST- ZIP				6.4 CI	TY-SI	T-71P								i

14. Thereby 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 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 07 on an attachaent with an address.

SIGNATURE:

01-07-28 -305.2600025