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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000090440 (4)

ROBERIC, INC.

Principal Place of Business Mailing Address											
	GULF BLVD PETE BEACH FL 33706	6860 GULF BLVD St. Pete Beach FL 33706-2028									
						3. Date Incorporated or Qualified 11/04/1996	3a. Date	e of Last Report			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For				
21]		[26]	26			59-3414023		Not Applicable			
22 Si	Sulte, Apt. #, etc.	Suite, Apt. #, e	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State				6. Election Campaign Financing					
23		28				Trust Fund Contribution		\$5.00 May Be Added to Fees			
Z	ip Country	Zip	Co	Country		8. This corporation has liability for intangible tax under s. 199,032,					
24	25	29	30				<b>≰</b> Yes []				
	9. Name and Address of Current Registered Agent					10. Name and Address of New Re	gistered A	gent			
	BROIDA, JOEL D ESQ.			81	Name	THE PROPERTY OF STREET AND STREET		A			
						Street Address (P.O. Box Number is Not Acceptable)					
	Of The benoming will			83			<del></del> .				
				84	City		FL	85 Zip Code			

	Signature, typed or printed name of registered agent and title if applicable.	(NO1E - F	legistered Agent signature requ		DATE		
12.	OFFICERS AND DIRECTORS		18.	ADDITIONS/CHAP	NGES TO OFFICERS AND		
ITLE		DELFTE	1.1 TITLE			☐ Change	Addilio
AME	RICE, ROBERT B		1.2 NAME				
TREET ADDRESS	5408 PALI WAY	,	1.3 STREET ADDRESS				
ITY-ST-ZIP	ST. PETE BEACH FL 33706		1.4 C(1) Y - ST - Z(P				
TLE	, <del>-</del>	DELETTE	2.1 TITLE			Change	Addition
AME	BEERS, ERIC E		2.2 NAME				
TREET ADDRESS	531 77TH AVE		2.3 STREET ADDRESS				
NTY-ST-ZIP	ST. PETE BEACH FL 33706		2. # C(1Y - \$1 - Z(P				
TLE		DELFTE	3.1 TITLE			Change	Addilio
AME .			3.2 NAME				
TREET ADDRESS			3.3 STREET ADDRESS				
ITY-ST-ZIP			3.4 CITY-ST-ZIP				
ITLE		DELETE	4.1 TITLE			Change	Addilio
IAME			4. 2 NAME				
TREET ADDRESS			4.3 STREET ADDRESS				
ITY-ST-ZIP			4.4 CITY - ST- ZIP				
ITLE		DELFTE	5.1 TO LE			Change	Addilio
AME			5.2 NAME				
TREET ADDRESS			5.3 STREET ADDRESS				
TY-ST-ZIP			5.4 CITY - ST - ZIP				
TLE		DELETÉ	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Additio
AME			G.2 NAME				
TREET ADDRESS			6.3 STREET ADDRESS				
AIF TO VE			0.1.0171/. 07. 700				

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 eath; 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 of changed, or on an attachment with an address.