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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000092453

	1.	ROMANOS BROTH	ERS, INC.				
}	Pr	incipal Place of Business		Mailing Address POST OFFICE BOX 321115 COCOA BEACH FL 32932-1115 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Count 29 30			
	Principal Place of Business 382 N. ORLANDO AVE. COCOA BEACH FL 32931 US 2. Principal Place of Business 21 Suite, Apt. #, etc.						
		Principal Place of Business		\vdash	Mailing Address		*************************************
1	22	Suite, Apt. #, etc.			Suite, Apt. #, etc.		
<u></u>	23	City & State		28	 		
	24	Zip 25	Country	29	Zip		ountry

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90035 033 ***150.00



DO NOT WRITE IN THIS SPACE	

					3. Date Incorporated or Qualifed 11/12/1996				
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	A	plied For		
21		26			59-3408540	No	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1477		5. Certificate of Status Desired	*	Additional		
27					5. Certificate of Status Desireo	Fee Re	equired		
City & Stat	te	City & State			6. Election Campaign Financing		May Be		
23		28			Trust Fund Contribution	Added	to Fees		
Zip	Country	Zip	Country		8. This corporation owes the current year Intan		m.,		
24	25	29 30	<u> </u>	Personal Property Tax. Yes No					
	9. Name and Address of Current	Registered Agent	10. Name and Address of New Registered Agent						
MAC	RCELINO E. ROMANOS		81 Name						
+-	AZALEA DR.		82 Street Address (P.O. Box Number is Not Acceptable)						
	COA BCH FL 32931		83						
COC	OUA BUTIFL 32931	· ·							
		,	84	City		85 Zip	Code		
				, <u>, , , , , , , , , , , , , , , , , , </u>	<u> </u>				
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the above	e-named cor	poration submits this statement for the purpose of clion's board of directors. I hereby accept the appoint	ianging its nent as re	registered gistered		
agent. I a	am familiar with, and accept the obligati	ions of, Section 607.0505, Florida	Statutes		and a sound of direction of the sound of the				
SIGNATURE	ger, young or								
	Signature, typed or printed name of registered agent		-	nt signature requir	red when reinstating) DATE	DIDECT	NDC IN 12		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	Change	TAddition		
TITLE				[ZOMANOS, RHEA G				
NAME	ROMANOS, MARCELINO E		1.2 NAME	7	4 AZALED DR				
STREET ADDRESS	_			ADDRESS	COCOP BEACH FL 32931				
CITY-ST-ZIP			1.4 CITY-S 2.1 TITLE		4 AMP 85 - 4 1 0 3 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	Change	Addition		
TITLE	ROMANOS, ABDALLAH E	- Detere	2.1 TITLE 2.2 NAME	٥	Y				
NAME				TADORESS					
STREET ADDRESS	COCOA BEACH FL]					
CITY-ST-ZIP	STD	☐ DELETE	2.4 CITY-S 3.1 TITLE	ST-ZIP		Change	Addition		
TITLE	ROMANOS, PAUL E		3.1 IIILE						
NAME	44 4744 54 5500 5	راير فالمحمود المنتاسبي حجم	-	TADDRESS	لوليك يبيوان كالرائدون وطاريا الغارات المحارة				
STREET ADDRESS	COCOA BEACH FL 32931		3.4. CITY-1						
CITY-ST-ZIP*	V	☐ DELETE	4.1 TITLE	11- AF		Change	Addition		
NAME	ROMANOS, JAMAL B		4. 2 NAME				_		
STREET ADDRESS	44 471154 00	•	ļ.	T ADDRESS					
	COCOA BCH FL 32931		4.3 STREE						
CITY-ST-ZIP TITLE	V	☐ DELETE	5.1 TITLE	1-217		Change	Addition		
NAME	ROMANOS, RIMA		5.2 NAME						
STREET ADDRESS	AND CARLINE DO		5.3 STREE	TADDRESS					
CITY-ST-ZIP	COCOA BCH FL 32931		5.4 CITY-S						
TITLE	V 5555E 5255.	DELETE	6.1 TITLE			Change	☐ Addition		
	1 7								
	ROMANOS, TAKLA		6.2 NAME						
NAME STREET ADDRESS	ROMANOS, TAKLA 14 AZALEA DR			T ADDRESS					

I 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 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: