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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000095673 (5)
ROME INDUSTRIES, INC.

NAME

STREET ADDRESS CITY-ST-ZIP

Delevier I Diev	- 10	National Astalana			<u> </u>	<u> </u>	F 1881 8 8 8 1
Principal Place of Business Mailing Address 170S CAMELIA COURT 170S CAMELIA COURT							
170S CAMELIA COURT VERO BEACH FL 32963		VERO BEACH FL 32963-1069					
					3. Date Incorporated or Qualified 11/22/1996	3a. Date of Last R	Beport
2. Principal P	Place of Business	28. Mailing Address			4. FEI Number		optied For
1		26		34-1192019	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #. etc.			5. Certificate of Status Desired		
City & Stat	е	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25	Ζφ 29	Country 30			Yes 🔲 No	. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
	A, ROME P SR		81	Name	a		
170 S CAMELIA COURT			82	Street Add	dress (P.O. Box Number is Not Acceptat:	le)	
VER	O BEACH FL 32963		83				
			83				
			84	City		FL 85 Zip	Code
12.	Signature, typed or printed name of registered as OFFICERS AN	ND DIRECTORS	18.	a signature requ	ried when tensisting) ADDITIONS/CHANGES TO OFFIC		
TITLE	BUSA, ROME P SR	☐ DELETE	☐ DELETE 1 1 1 DEE 1 2 NAME 1.3 STREET ADDRESS			☐ Change	Addite
NAME STREET ADDRESS	170 S CAMELIA COURT						
CITY-ST-ZIP	VERO BEACH FL 32963		1.4 CHY - S				
TITLE	D	DELETE	2.1 ULE			☐ Change	Additio
NAME	BUSA, KATHRYN M		2.2 NAME				
STREET ADDRESS	170 S CAMELIA COURT		2.3 S78E11	ADDRESS			
CITY-ST-ZIP	VERO BEACH FL 32983		2. 4 CITY - S1 - ZIP			and the second second second	-
TITLE	BUSA, ANTHONY J	☐ OLLETE	3.1 1011	}		☐ Change	Additio
NAME	30600 SALEM DRIVE		3.2 NAME	Marine of			
STREET ADDRESS	BAY VILLAGE OH 44140		3 3 S 1 HE 1 1				
CITY-ST-ZIP	D	DELETE	3.4. CITY - 5 4.1 TILLE	1 · 70'		Change	Additio
NAME	BUSA, ROME P JR		4. 2 NAME				
STREET ADDRESS	14822 HILLBROOK LANE		4.3 STREET	ADDRESS			
CITY-ST-ZiP			4.4 CHY - S	- ZIP			
TITLE		DELFTE	51 TALLE			Change	Addili
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		Doctar	5.4 CHY-S	I - ZIP		Change	Addit:
TITLE	1	☐ DELFTE	6.1 101.0			unange	

14. I do hereby certify that the information supplied with this firing 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 frue 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 consecution of the receiver or trusted engagement by execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or on an attachment with an address.

6.2 NAME

FILED

May 07 1997 8:00am

Secretary of State