

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # P96000095673

1. Corporation Name

ROME INDUSTRIES, INC.

Principal Place of Business

170 S CAMELIA COURT
VERO BEACH, FL 32963

Mailing Address

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
11/22/1996

3a. Date of Last Report

4. FEI Number

34-1192019

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

BUSA, ROME P SR
170 S CAMELIA COURT
VERO BEACH, FL 32963

61 Name

62 Street Address (P.O. Box Number is Not Acceptable)

63

64 City

FL 65 Zip Code

10. Name and Address of New Registered Agent

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 with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

CR2E034 (9/96)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		1.2 NAME	BUSA, ROME P SR		
STREET ADDRESS		1.3 STREET ADDRESS	170 S CAMELIA COURT		
CITY-ST-ZIP		1.4 CITY-ST-ZIP	VERO BEACH, FL 32963		
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	BUSA, KATHRYN M	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		2.2 NAME	170 S CAMELIA COURT		
STREET ADDRESS		2.3 STREET ADDRESS	VERO BEACH, FL 32963		
CITY-ST-ZIP		2.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	BUSA, ANTHONY J	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		3.2 NAME	30600 SALEM DRIVE		
STREET ADDRESS		3.3 STREET ADDRESS	BAY VILLAGE, OH 44140		
CITY-ST-ZIP		3.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	BUSA, ROME P JR	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		4.2 NAME	14822 HILLBROOK LANE		
STREET ADDRESS		4.3 STREET ADDRESS	NOVELTY, OH 44072		
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY-ST-ZIP			

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***165.00

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 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.

Rome P. Busa 5/197

SIGNATURE: Rome P. Busa, Sr.