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 #
1. Corporation Name P97000030147 (7)

ROMANO'S OIL, INC.

Principal Place of Business	Mailing Addres		
3985 10 AVE NORTH	3985 10 AVE		
LAKE WORTH FL 33461	LAKE WORTH		

FILED Apr 24 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Add	ress			
3985 10 AVE		3985 10 AV				
LAKE WORTH	FL 33461	LAKE WORT	TH FL 33461			DO NOT WRITE IN THIS SPACE
İ						3. Date Incorporated or Qualified
						,
9 Principal P	lace of Business	2a. Mailing A	Addrose			04/02/1997 4. FELNumber Applied For
 · · · · · · · · · · · · · · · · · ·						
Suite, Apt.	# Alc	·	Suite, Apt. #, etc.			\$9.75 Additional
22		27	 			5. Certificate of Status Desired Fee Required
City & State			City & State			
23			28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country		
24	25	29	<u> </u>	30		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
67	9. Name and Address of Curre			301		10. Name and Address of New Registered Agent
DAI				81	Name	
	MANO, CAROLINDA					
	B1 NW 107 AVE			82	Street	t Address (P.O. Box Number is Not Acceptable)
CQ	RAL SPRINGS FL 33065			63		
				0.3		
				84	City	85 Zip Code
						FL S Zip cook
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607,1508, F e of Elorida, Such c	florida Statute hanne was ai	s, the above uthorized by	e-named the cor	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	pations of, Section (607.05 0 5, Flo	rida Statute	S.	The state of the second of the
SIGNATURE						
	Signature, typed or printed name of registered ag		(NOTE		ent signatur	re required when reInstaling) DATE
12.		ID DIRECTORS	DELETE.	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	L	DELETE	1.1 TITLE		Change Addition
NAME	RAMANO, CAROLINDA			1.2 NAME		
STREET ADDRESS	4261 NW 107 AVE			1.3 STREET	ADDRESS	·
CITY-ST-ZIP	CORAL SPRINGS FL 33065			1.4 CITY - S	T-ZIP	
TITLE		L.] DELETE	2.1 TITLE		Li Change Li Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET A		
CITY-ST-ZIP				2. 4 CHY-ST-2		
TITLE			DELETE	3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY+ST-ZIP				3.4. CITY -	S1-7IP	
TITLE			DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - S		
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY - S		
TITLE		——— 	DELETE	6.1 TITLE	1 20	Change Addition
NAME		_		6.2 NAME		C Change C Madition
1					ADDRESS	
STREET ADDRESS				6.3 STREET		
CITY-ST-ZIP		 		6.4 CITY+S	T-ZIP	

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.