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 # P97000061256

1, Corporation Name

ROMIKER CORP.

Principal Place of Business

Mailing Address

44044 ABM SOTUL OT

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90166 011 ***150.00



CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065				
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed 06/27/1997
a Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
	7 N. ANDREWS AV	626 6517 N.A	NORENS A	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
22 27 City & State City & State				
City & State 23 FT. LAUDERDALE, FL Zip Country		28 FT. LAUDERD	ale, FL	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
		Zip	Country	8. This corporation owes the current year Intangible
24 333	09 25 LISA	29 33309 30	USA	Personal Property Tax. Yes No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
MINDERLICH FRIC G. WUNDERLICH				
82 Street Address (P.O. Box Number is Not Acceptable)				
11911 NW 281H SI. 6517				6517 N. ANDREWS AVE
CORAL SPRINGS FL 33065				
84 CITY T. LAUDERDALE FL 85 Zip Code 9				
"FT.LAVOERDALE FL " 33309				
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 oblit, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.				
agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.				
signature agent. 1 am familiar with, and accept the obligations of, Section 60 1505, Florida Statutes. ELIC G. WUNDELLICH 4/20/99				
SIGNATURE	Signature, typed or printed name of registered agent		egisterød Agent signature red	juired when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	
NAME	WUNDERLICH, ERIC G			WUNDERLICH, E. 6517 N. ANDREWS AVE.
STREET ADDRESS	11911 NW 28TH ST		1.3 STREET ADDRESS	6517 N. ANDREWS 7142.
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-ST-ZIP	FT LAUDERDALE , FL 33309
TITLE		☐ DELETE	2.1 TTLE	☐ Change
NAME			2.2 NAME .	BILL, RON M.
STREET ADDRESS			2.3 STREET ADDRESS	GSIT N. ANDREWS AVE.
CITY-ST-ZIP			2.4 CITY-ST-ZIP	FT LAUDERDALE , FL 33309
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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

SIGNATURE: