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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P97000080738 (2)

ROME REALTY, INC.

FILED Jan 30 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 3780 NE 209 TERRACE 3780 NE 209 TERRACE AVENTURA FL 33180 AVENTURA FL 33180 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/17/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0785384 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zìp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SALAZAR, LISETTE 50 W MASHTA DRIVE STE 2 Street Address (P.O. Box Number is Not Acceptable) KEY BISCAYNE FL 33149 83 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 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE ___ Addition TITLE 1.1 TITLE Change FEINBERG, ROUAL NAME 1.2 NAME 16445 COLLINS AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI BCH FL 33160 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition MILLER, MELVIN NAME STREET ADDRESS 3780 NE 209 TERR 2.3 STREET ADDRESS AVENTURA FL 33180 CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE Change ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 TITLE 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 cath; 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.

SIGNATURE:

CHATURE ADWERTOZ

14/98

305-9352418

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