PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000083618

1. Corporation Name

R.O.C. TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

9200 SOUTH DADELAND BLVD. #412 MIAMI FL 33156

9200 SOUTH DADELAND BLVD. #412

MIAMI FL 33156

May 04, 1999 8:00 am Secretary of State

05-04-1999 90179 027 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/22/1997

				1 33123		
— 11.\ <u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 440		26	···	65-0783209	Not Applicable	
Suite Apt.	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 04		27				
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees	
23 /		28	Country	Trust Fund Contribution		
Zip ZiZi	Country		¬ .	 This corporation owes the current year Personal Property Tax. 	r intangiole ☐ Yes ☐ No	
24 704	9. Name and Address of Current R		<u> </u>	10. Name and Address of New Registe		
	9. Name and Address of Current R	Mistelen Whelit	81 Name	10. Home did /tod/ood of the stageste		
KENNETH F. DARROW, P.A.						
9200 SOUTH DADELAND BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 412						
SUITE 412 MIAMI FL 33156				50		
			84 City M	Lami	EI 85 Zig Code	
L		1 CO7 1500 Flacida Chata	the above several se	amoration submits this statement for the purpos	e of changing its registered	
l office or o	pointered agent or both in the State of F	lorida. Such change was auth	lorized by the comor	orporation submits this statement for the purpos ation's board of directors. I hereby accept the a	ppointment as registered	
agent. I a	m familiar with, and accept the obligation	s of, Section 607.0505, Florida	a Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and	Little if applicable (AIOTE: Re	gistered Agent signature req	usined when reinstation) DAT		
12.	OFFICERS AND D	, ,	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE		Change	
I NAME	PIERSON, JACK		1.2 NAME	_		
STREET ADDRESS	9200 S DADELAND BLVD, #100		1.3 STREET ADDRESS	440 S. FED ERAL HWY	# KU	
CITY-ST-ZIP	MIAMI FL 33156		1,4 CITY-ST-ZIP	DEERFIELD BCH, FL 3	3441	
TITLE	SD	☐ DELETE	2.1 TITLE		Change Addition	
NAME	CURRAN, JOHN C		2.2 NAME	6 5	33.4	
STREET ADDRESS	9200 S DADELAND BLVD, #100	1	2.3 STREET ADDRESS	440 S. FEDERAL HWY	#104	
CITY-ST-ZIP	MIAMI FL 33156		2.4 CITY-ST-ZIP	DEEPFIELD BUH, FL 3	3441	
TITLE	TAS	☐ DELETE	3.1 TITLE	TAS D	Change Addition	
NAME	PRISKIE, STANLEY		3.2 NAME		,, 16 i	
STREET ADDRESS	9200 S DADELAND BLVD, #100	,		440 S. FEDERACHWY		
CITY-ST-ZIP	MIAMI FL 33156		3.4. CITY-ST-ZIP	DEGREGO BCH, FL 3	3441	
TITLE	VP	☐ DELETE	41 TITLE	• •	☑ Change ☐ Addition [
NAME	RODGEZ, TERRY		4. 2 NAME	KODGER, TERRY		
STREET ADDRESS	9200 DADELAND BLVD, #100		4.3 STREET ADDRESS	RODGER, TERRY 440 S. REDERAL HENY	#104	
CITY-ST-ZIP	MIAMI FL 33156		4.4 CITY-ST-ZIP	DEER FIELD BCH, FL 32	<u> </u>	
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			
	Windows Profession	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	

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 changed, or on an attachagent with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

, 13³

37 军 633