Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90041 019 ***150.00

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 # P98000023778

1. Corporation Name

THE ROGART COLLECTION, INC.

THE BOOM TOCKESTION INC.												
										II DANN DANN I		
Principal Place of Business Mailing Address												
1801 SOUTHWEST 23RD TERRACE 1801 SOUTHWEST 23RD TER			RACE									
MIAMI FL 33145 MIAMI FL 33145			3145				DO NOT WRITE IN THIS SPACE					
	•						3. Date Incorp	orated or (Qualifed		_	
						03/13/1998						
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address				4. FEI Numbe	00	101	620	App	lied For
21		26	26				62	00	, • •			Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of	f Status De	esired		\$8.75 A		
22	· · · · · · · · · · · · · · · · · · ·		27 City & State			. .	tarente di					
City & State		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Country	Zip		Count	try		8. This corpor	ation owes	the curre	ent year Inta	ingible	
24	25	29	30	0			Personal P	roperty Tax	ζ.		☐ Yes I	□No
	9. Name and Address of Current	Registered A	gent	<u> </u>			10. Name and	Address of	of New R	egistered /	Agent	
***	DB 41/4/6/5			8	Name	0	NELIO	CE	JA	S		
AMERILAWYER 343 ALMERIA AVENUE					32 Street /	Addres	ss/P.O. Box Nu	nber is No	Accepta	ble		
CORAL GABLES FL 33134				-			801 3	w	<u> </u>	Just		
CORAL GADLES FL 33134					33							i
					34 City	~	MAMI			FL	85 Zip G	ode 4 5
11 Dureuant	to the provisions of Sections 607 0502	2 and 607,1508	Florida Statutes	the abo	L ove-named	COLDO	ration submits thi	s statemer	nt for the			
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such	change was and	7rizyd I	by the corpo	ration	's board of direc	tors. I here	by accep	t the appoir	ntment as reg	istered (
agent. I ai	m familiar with, and accept the obligat	ions of, Section ゴA C	00.0000, 1200	المالمات الم	00.					4-	12-9	9
SIGNATURE	Signature, typed or printed name of registered agen		, (NOTE: Re	egiste ed A	gent signature n	equired v	when reinstating)			DATE	<u> </u>	
12.	OFFICERS AN			/ 13.			ADDITIONS	CHANGES	S TO OFF	ICERS AN	D DIRECTO	
TITLE	PD		□ DELETE	1.1 TITU	E						Change	☐ Addition
NAME	PUERTO, JESUS W			1.2 NAM	E							ł
STREET ADDRESS					EET ADDRESS							
CITY-ST-ZIP	MANUEL COARE											
TITLE	VSTD		DELETE	2.1 TITU	/-ST-ZIP							
NAME	OF IAC ONFLIC				-						Change	Addition
				2.2 NAM	-						Change	☐ Addition
	CEJAS, ONELIO 1801 SOUTHWEST 23RD TERR	ACE			-						☐ Change	Addition
CITY-ST-ZIP		ACE		2.3 STR	Æ							
1 1	1801 SOUTHWEST 23RD TERR	IACE	☐ DELETE	2.3 STR	EET ADORESS Y-ST-ZIP					<u>.</u>	Change	Addition
CITY-ST-ZIP	1801 SOUTHWEST 23RD TERR	ACE	DELETE	2.3 STR	EET ADORESS Y-ST-ZIP E			<u></u>				
CITY-ST-ZIP	1801 SOUTHWEST 23RD TERR	IACE	DELETE	2.3 STRI 2.4 CIT 3.1 TITU 3.2 NAM	EET ADORESS Y-ST-ZIP E	-		-		-		
CITY-ST-ZIP TITLE NAME	1801 SOUTHWEST 23RD TERR	ACE	DELETE	2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STRI	EET ADDRESS Y-ST-ZIP E	-					Change	Addition
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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 changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

Change

Addition