2001 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 06, 2001 8:00 am

1 Entity Nam	ROAMER, INC.			女 # つきもらな。	ary of State 1 90072 021 ***550.00
Principal Plac	ce of Business	Mailing Address		1	
31 BOUNDARY LANE SAME KEY WEST, FL 33040					40080580
	Place of Business	3. Mailing Address		1	
SAME Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE	IN THIS SPACE
City & State		City & State		4. FEI Number 65 – 0224384	Applied For Not Applicable
Zip .	Country	Zip	Country.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Re	
			Name		
ALAN G. HILL		Street Address	s (P.O. Box Number is Not Acceptable	e)	
31 BOUNDARY LANE			154		
KEY WE	ST, FL 33040	•	City		FL Zip Code
8. The above	named entity submits this statement	Les de la company de la compan	• *	egistered agent, or both, in the State Agent signature required when reinstating	
Tax filing re	ration is eligible to satisfy its Intangible outrement and elects to do so. a on back)		!! FEE IS \$150.00 D1 Fee will be \$550.00 le to Department of S		Added to Fees
11.	OFFICERS AND D	IRECTORS	12.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS* CITY - ST - ZIP	P, T, D ALAN G. HILL 31 BOUNDARY≈LANE KEY WEST, FL 330		TITLE NAME STREET ADDRESS CITY: ST - ZIP		Change Addition Change Addition Addition (S)
TITLE	D CAROL HILL	Delete Delete	TITLE NAME		Change Addition
STREET ADDRESS CITY - ST - ZIP	31 BOUNDARY LANE		STREET ADDRESS		± .
TITLE NAME	101 11017 10 05	Delete	TITLE NAME		. Change Addition
STREET ADDRESS CITY - ST - ZIP			STREET ADDRESS		
TITLE		Delete	TITLE		Change Addition
NAME STREET ADDRESS			NAME STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		Delete	TITLE	···	Change Addition
NAME STREET ADDRESS			NAME STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE					
		Delete	TITLE		Change Addition
NAME CARSEY ADDRESS		Delete	NAME		Change Addition
NAME STREET ADDRESS GITY - ST - ZIP					Change Addition

information indicated on this report or supplied with this mind does not qualify for the exemption stated in 19.07(3)(i), Florida Statutes. Florida Statutes information indicated on this report or supplemental 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 11 or Block 12 Hehanged, or on an attachment with an address, with all other like empowered.

IGNATURE:

| 130/01 305-294-6963

SIGNATURE: 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR