FILED **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00** Apr 09 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS **DOCUMENT # \$07061** R.O.G.G., INC., Principal Place of Business Mailing Address 9831 OLD LAKELAND HWY. 9931 OLD LAKELAND HWY. DADE CITY FL 33525-0702 DADE CITY FL 33525 3. Date Incorporated or Qualified 3a. Date of Last Report 04/25/1996 10/15/1990 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 59-3033993 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zιο Country Zip Country This corporation has liability for intangible tax under s. 199,032, Florida Statutes Yes No 25 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name REEN AKERS, OPAL GURDUN 9931 OLD LAKELAND HWY. Street Address (P.O. Box Number is Not Acceptable)
389LS CENTENNIAL ROAD 82 DADE CITY FL 33525 83 City DADE 64 Zip Code 333525 C ITY 11. Pursuant to the provisions of Sections 667.0502 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 rip the State of Florida. Such changing was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am family a with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE. Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE 1.1 TITLE Change THILE GREEN GUY 38903 CENTENNIAL ROAD GREEN, GORDON NAME 12 NAME 38915 CENTENNIAL RD STREET ADORESS 1.3 STREET ADDRESS DADE CITY FL DADE GITY P1 3352 CITY-ST-7P 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition AKERS, OPAL NAME 2.2 NAME 9931 OLD LAKELAND HWY. STREET ADDRESS 2.3 STREET ADDRESS DADE CITY FL CITY - ST - ZIP 2 4 CiTY-ST-ZIP DELETE Change Addition 3.1 TITLE TULE OSBORNE, HARRY K JR. NAME 3.2 NAME **38239 PEAR CT** STREET ADDRESS 3.3 STREET ADDRESS ZEPHYRHILLS FL 3.4. CITY-ST-ZIP DITY-ST-ZP Change DELETE Addition TITLE 4.1 TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - 70P 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE 7016 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CI1Y - S1 - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE 6.2 NAME NAME

I do hereby certify that the information supplied with this three foes 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 supplied 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

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with

STREET ADDRESS

Daytime Phone #