

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S42097** (3)
1. Corporation Name
ROPA ENTERPRISES INC.



Principal Place of Business 3350 NW 60 ST MIAMI FL 33142 US	Mailing Address 8460 N.W. 24TH ST. SUNRISE FL 33322
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 P.O. Box 848966 27 Suite, Apt. #, etc. 28 PEMBROKE PINES 29 Zip Country 33084-8966 USA		3. Date Incorporated or Qualified 04/01/1991	
		4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent RICHARDS, RONALD 8460 N.W. 24TH ST. SUNRISE FL 33322				10. Name and Address of New Registered Agent 81 Name RICHARDS, RONALD 82 Street Address (P.O. Box Number is Not Acceptable) 3350 NW 60 ST 83 84 City MIAMI FL 85 Zip Code 33142	

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	
TITLE	D	1.1 TITLE	D
NAME	RICHARDS, RONALD	1.2 NAME	RICHARDS, RONALD
STREET ADDRESS	8460 N.W. 24TH ST.	1.3 STREET ADDRESS	4103 TRENTON AVE
CITY-ST-ZIP	SUNRISE FL	1.4 CITY-ST-ZIP	COOPER CITY FL 33026
TITLE	VP	2.1 TITLE	VP
NAME	RICHARDS, PAULINE	2.2 NAME	RICHARDS, PAULINE
STREET ADDRESS	8460 NW 24 ST	2.3 STREET ADDRESS	4103 TRENTON AVE
CITY-ST-ZIP	SUNRISE FL	2.4 CITY-ST-ZIP	COOPER CITY FL 33026
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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 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.

SIGNATURE:

[Handwritten signatures] VP 6/13/98 (305) 331 7778

CR2E034 (10/97)