* PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED 99 OCT 27 PM 6: 40 SECRETARY OF STATE TALLAHASSEE, FLORIDA

	MENT # S76440 CORPORATION			TALLAHASSEE,	FLERIDA
Principal Pla	ce of Business	Mailing Address		T HOREWALL DING BIND BIND BOND DOWN DA	Bil Elbit Binti blast ninkt 968tl 1051
P.O. BOX 0061663 P.O. BOX 0061663					
PALM BAY FL	32905	PALM BAY FL 32905		DO NOT WRITE IN 1	THIS SPACE
				3. Date incorporated or Qualified	
	D	- 1 A- 44 W A-11		08/28/1991 4. FEI Number	
2. Principa: i 21	Place of Business	2a. Mailing Address		59-3221494	Applied For Not Applicable
Suite, Apt	t #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	, <u>.</u>	Trust Fund Contribution	Added to Fees
Ζιμ 1	Country	Zip	Country	8. This corporation owes the current year	
24	25 9. Name and Address of Currer	29 Agent	30	Intangible Personal Property. 10. Name and Address of New Registe	
	Traine and Address of Conten	it registered Agent	81 Name		
MILI	ler, allen L		20 0		
398-B NORTH HARBOR CITY BLVD			82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)	
MEL	Bourne Fl. 32935		83		
			84 City		85 Zip Code
			Oily		FL S Z S S S S S S S S
office o agent I	am familiar with, and accept the oblig	e of Ftorida. Such change was a ations of, section 607,0505, Flo	authorized by the co orida Statutes.	corporation submits this statement for the purpose rporation's board of directors. I hereby accept the a	ppointment as registered
	Signature typed or printed name of registered ages			ature required when reinstating) DA	
12.	OFFICERS AN	ID DIRECTORS	13. 1.1 DTLE	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME	CHANCE, AUDREY	DELETE	1.2 NAME		Change
SIREET ADDRESS			1.3 STREET ADDRESS		
CITY ST ZIP	MELBOURNE FL 32935		1.4 CITY-ST-ZIP	3000030	33633
TITLE	THEED STATE OF SECOND	DELETE	2.1 TITLE	****12U	358334 301011008 .00-****1\$0409
NAME	1		22 NAME	*****100	,80-
STREET ADDRESS	ş İ		2.3 STREET ADORESS	s	
CITY-ST-Z-P			2 4 CITY-ST-ZIP		
THILE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
SIREETADORES	5		3 3 STREET ADDRESS	s	
CHTY ST-7IF			3.4 CITY-ST-ZIP		
NAME		☐ DELETE	4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS	s	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TIPLE		DELETE	5.1 TITLE		Change Addition
NAME				i e	
			5.2 NAME		1
STREET ADDRESS	3		5.2 NAME 5.3 STREET ADDRESS	s	
STREET ADDRESS COTY-ST-ZIP	6			s	

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 of 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 cett; that I 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 and a long the corporation of
6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

MILLER, MILLER & ASSOCIATES

ALLEN MILLER (407) 259-7704

Tax and Accounting Service 2087 Sarno Road Melbourne, FL 32935

MARGE MILLER (407) 259-7566

October 10, 1999

Florida Department of State Annual Reports Filings Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Gentlemen:

Attached you will find the **SECOND NOTICE** for ROMWIL Corporation, P.O. Box 0061663, Palm Bay, FL 32905 along with the corporations check in the amount of \$150.00.

During the renewal period, the owner suffered a stroke and two weeks later a heart attack. While the doctors were able to get a "clot buster" into the owner in time there has been a continued lack of "understanding" at times due to some apparent brain damage caused by the stroke. In short, the corporation has been "limping" along. Additionally and most importantly, this is one of the few minority owned corporations in the area. Due to slowness in business, the cash flow is down as the owner has been unable to perform in the true capacity due to stroke and heart attack.

Please note that the check was made out on July 30, 1999 but my office held up on the renewal due to the uncertainty of the owner's continued health.

I am asking for your help in this matter, please renew the corporation for 1999 at the original rate due to hardship and health reasons.

Please accept my "thanks" for your help and attention to this matter.

Sincerely,

Allen L. Miller, E.A., P.A.

Tax Accountant

cc:file client

Attachments - 2 Check 4554/Corp Renewal