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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V53086

(7)

ROBERT	I INTERNA	TIONAL, INC.		, ,								
Principal Place of Business Mailing Address												
7650 S. TAMIAMI TRAIL POST OFFICE BOX 35246 SIOTE 10 SARASOTA FL 34242-5246 US US												
US							3. Date Incorporated or Qualified					
2. Principal Place of Business			├ ──	ling Address	·········			4. FEI Number		Ap	pplied For	
21 Suite Ant	# ata		26	e, Apt. #, etc.				65-0359570			ot Applicable	
Suite, Apt #, etc				27				5. Certificate of Status Desired Security Securi				
City & State				City & State				Election Campaign Financing \$5.00 May Be				
23			28	28				Trust Fund Contribution Added to Fees				
Zıp	Country		Zip		Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25 9. Name and Address of Cur		29					Florida Statutes Y Yes No 10, Name and Address of New Registered Agent				
TIEG.			reni negisterec	ı Ağənı	81	ıT	Name	10, Name and Address of New Re	âre se se s	a Agent		
HESTER, GORDON 7650 S. TAMIAMI TRAIL					82							
SUITE 10						2	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)			
SARASOTA FL 34231					83	3			··············	· · · · · · · · · · · · · · · · · · ·		
					84		City			85 Zip (Code	
44 Purguant	to the Louisia	no of Codiona CO7	0000 and 607 16	OR Florido Statu	los the sha	<u></u>			FI	_		
	regist red age am familiar with	nt or both in the St and occept the of	ate of Florida, Si oligations of Sec	uch change was ation 607 0506, P	authorized b orida Statute	/U- IY-1 IS.	the corporation	oration submits this statement for the pon's board of directors. I hereby acce	ot the ap	oppointment as	registered	
SIGNATURE	Signal de Typed o	printed name of registers:	aya danonga d	(NO)	IE: Registered Ag	jent	t signature require	d when reinstating)	DATE	21/7/		
12.		OFFICERS	AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFIC	ERS AN	ID DIRECTOR	S IN 12	
TITLE	D			DELETE	1.1 TITLE					Change	Addition Addition	
NAME	HESTER, G		TTT 10	ITE 10]					
STREET ADDRESS		MIAMI TRAIL, SU	IIIE 10				DORESS					
CITY - ST - ZIP TITLE	SARASOTA	i PL	•	DELETE	1.4 CITY -: 2.1 TITLE	ST-	ZIP			☐ Change	Addition	
NAME				beter	2.1 IIILE 2.2 NAME					стапус	LJ Addition	
STREET AGORESS					23 STREE		nnatec					
CHY-S1-ZIP					2 4 CITY-		1	- 1.				
TITLE				DELETE	3 1 TITLE	311	- 24			Change	Addition	
NAME					32 NAME		ļ			-		
STREET ADDRESS					33 STREE	T A	DDRESS					
CITY - ST - ZIF					3.4. CfTY+	ST-	-ZIP					
TITLE				☐ DELETE	4 1 TITLE					Change	Addition	
NAME					4 2 NAME	Ξ						
STREET AOORESS					43 STREE	TA	DDRESS					
CITY-ST-ZIP					4.4 CiTY-		ZIP			· · · · · · · · · · · · · · · · · · ·		
TITLE				☐ DELETE	5 1 TITLE					☐ Change	Addition	
NAME					52 NAME							
STREET ADDRESS					5.3 STREE							
CITY - ST - ZIF	ļ			DELETE	5.4 CiTY-1		ZIP			Charac	A dans	
TITLE				F" DECEIE	61 TITLE					Change	Addition	
NAME CTOLL LADDRICE					6.2 NAME		DOGE OF THE PERSON					
STREET ADDRESS	1				6.3 STREE	1 4	DDKF22					

64 CITY-ST-ZIP

14. I do 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 armual 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 empeyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address. SIGNATURE:

FILED

Feb 07 1997 8:00am

Secretary of State