

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90098 044 ***150.00

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1. Entity Name

ROE CORP.



Principal Place of Business

4185 PINE RIDGE LANE
WESTON FL 33331
US

Mailing Address

4185 PINE RIDGE LANE
WESTON FL 33331
US

50028357



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0054566

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERO, SAMUEL
4185 PINE RIDGE LANE
WESTON FL 33331

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME PERO, SAMUEL
STREET ADDRESS 4185 PINE RIDGE LANE
CITY-ST-ZIP WESTON FL 33331

TITLE ☐ Delete
NAME VS
NAME PERO, ROSANNE
STREET ADDRESS 4185 PINE RIDGE LANE
CITY-ST-ZIP WESTON FL 33331

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Donna Morgan
STREET ADDRESS 7620 N.W. 120 Drive
CITY-ST-ZIP Parkland, Florida 33076

TITLE ☐ Change ☒ Addition
NAME Kim Pero
STREET ADDRESS 4782 Sunkist Way
CITY-ST-ZIP Cooper City, Florida 33330

TITLE ☐ Change ☒ Addition
NAME Samuel J. Pero
STREET ADDRESS 8843 Bay Villa Court
CITY-ST-ZIP Orlando, Florida 32836

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SAMUEL PERO** Samuel Pero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-389-5091

Daytime Phone #