## **2005 FOR PROFIT CORPORATION**

## **FILED** Mar 25, 2005 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P01000115316** 1. Entity Name 03-25-2005 90024 011 \*\*\*150.00 **ROTH AGENCY INC.** Principal Place of Business Mailing Address 8177 GLADES ROAD, SUITE 26 8177 GLADES ROAD, SUITE 26 BOCA RATON, FL 33434-4063 BOCA RATON, FL 33434-4063 03202005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For -01-055 1324 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROTH, STEVEN A DO NOT WRITE 8177 GLADES ROAD, SUITE 26 BOCA RATON, FL 33434-4063 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE ROTH, STEVEN A NAME 8177 GLADES RD #26 STREET ADDRESS CITY-ST-7IP BOCA RATON, FL 33434 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY - ST- 7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE 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:

NAME STREET ADDRESS CITY-ST-ZIP