

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000128224

FILED
Feb 07, 2008
Secretary of State

Entity Name: ROCKRIGHT, INC.

Current Principal Place of Business:

4765 STONEVIEW CIRCLE
OLDSMAR, FL 34677 US

New Principal Place of Business:

5508 DEEPPDALE DR.
ORLANDO, FL 32821 US

Current Mailing Address:

4765 STONEVIEW CIRCLE
OLDSMAR, FL 34677 US

New Mailing Address:

5508 DEEPPDALE DR.
ORLANDO, FL 32821 US

FEI Number: 20-5685821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOULES, AYMAN L
334 EAST LAKE RD 251
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

BOULES, AYMAN L
5508 DEEPPDALE DR.
ORLANDO, FL 32821 US

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.

SIGNATURE: AYMAN BOULES

02/07/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: BOULES, FARAH A
Address: 4765 STONEVIEW CIRCLE
City-St-Zip: OLDSMAR, FL 34677 US

Title: P () Delete
Name: BOULES, AYMAN L
Address: 4765 STONEVIEW CIRCLE
City-St-Zip: OLDSMAR, FL 34677 US

Title: O () Delete
Name: BOULES, FRED A
Address: 4765 STONEVIEW CIRCLE
City-St-Zip: OLDSMAR, FL 34677 US

Title: V () Delete
Name: ANDDRAWES, GERMIN B
Address: 4765 STONEVIEW CIRCLE
City-St-Zip: OLDSMAR, FL 34677 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: BOULES, FARAH A
Address: 5508 DEEPPDALE DR.
City-St-Zip: ORLANDO, FL 32821 US

Title: P (X) Change () Addition
Name: BOULES, AYMAN L
Address: 5508 DEEPPDALE DR.
City-St-Zip: ORLANDO, FL 32821 US

Title: O (X) Change () Addition
Name: BOULES, FRED A
Address: 5508 DEEPPDALE DR.
City-St-Zip: ORLANDO, FL 32821 US

Title: V (X) Change () Addition
Name: ANDDRAWES, GERMIN B
Address: 5508 DEEPPDALE DR.
City-St-Zip: ORLANDO, FL 32821 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AYMAN BOULES

P

02/07/2008

Electronic Signature of Signing Officer or Director

Date