

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001837

Entity Name: ROSEAIRE RETREAT, INC.**Current Principal Place of Business:**14281 GALLAGHER RD.
DELRAY BEACH, FL 33445**Current Mailing Address:**14281 GALLAGHER RD.
DELRAY BEACH, FL 33445**FEI Number:** 65-0649421**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALWINE, ROBERT JESQ
MANOS, ALWINE & KUBLILIUN, P.L.
1001 BRICKELL BAY DRIVE, STE 1200
MIAMI, FL 33131 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRES
Name	ALVAREZ, JUAN MR
Address	10305 NW 41 ST SUITE 103
City-State-Zip:	DORAL FL 33178

Title	VP
Name	ROMEU, JAVIER MR.
Address	10328 NW 63RD DR
City-State-Zip:	PARKLAND FL 33076

Title	VP
Name	BECK, CECILIA MRS.
Address	7359 SERRANO TERRACE
City-State-Zip:	DELRAY BEACH FL 33446

Title	SCR.
Name	ROMEU, SANDY MRS
Address	10328 NW 63RD DR
City-State-Zip:	PARKLAND FL 33076

Title	TREA
Name	RODRIGUEZ, JESSE MR
Address	450 SUNSET RD.
City-State-Zip:	CORAL GABLES FL 33143

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUAN ALVAREZ

PRESIDENT

03/20/2014

Electronic Signature of Signing Officer/Director Detail_____
Date