


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # 411108		
1. Entity Name ROSSI AND MALAVASI ENGINEERS, INC		

Principal Place of Business 1615 FORUM PLACE SUITE 502 W. PALM BEACH, FL 33401 US	Mailing Address 1615 FORUM PLACE SUITE 502 W. PALM BEACH, FL 33401 US
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04292004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1416776	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SABERSON, ROGER G 70 SE 4TH AVE DELRAY BEACH, FL 33483-1514	
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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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MALAVASI, SANTIAGO P. 1615 FORUM PLACE STE. 502 WEST PALM BCH., FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ANDERSON, ROBERT 1615 FORUM PLACE STE. 502 WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: <u>Robert L. Anderson</u>	ROBERT L. ANDERSON VICE PRESIDENT 4/29/04 561-659-0554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	