## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name 563054

**ROCKY BEAR ENTERPRISES, INC.** 

(6)

## **FILED** Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						EIL BIBL BIBL BIBL BIBL BIBL 1681
450 FAIRWAY	DR	450 FAIRWAY DR			ļ	
SUITE 102 DEERFIELD BCH FL 33441		SUITE 102 DEERFIELD BCH FL 33441		DO NOT WRITE IN THIS SPACE		
US		US		3. Date Incorporated or Qualified		
•					03/14/1978	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		<del></del> 1	28		59-1805618	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		I	\$8.75 Additional	
22		27		5. Certificate of Status Desired L	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28				Trust Fund Contribution	
Zip	Country	Zip	Zip Country		8. This corporation owes or has paid t	he current year Intangible
24	[25]	29 3	0		Personal Property Tax due June 30	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
MEYER, JEFFREY W			81	Name		ł
450 FAIRWAY DR			82	Street Add	iress (P.O. Box Number is Not Acceptable)	
102			<u> </u>	<b>ļ.</b>		
DEERFIELD BCH FL 33432			83		•	
			84	City		85 Zip Code
				,		FL
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature typed or printed name of registered agent and tric if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  DATE						
12.	OFFICERS AND		13.	orn agniciale requ	ADDITIONS/CHANGES TO OFFICER	
TITLE	Р	DELETE	1.1 TITLE			Change Addition
NAME	MEYER, JEFFREY		1.2 NAME			1
STREET ADDRESS	450 FAIRWAY DR 102			T ADDRESS		1
CITY-ST-ZIP	DEERFIELD BCH FL 33441		1.4 CITY-			i
TITLE	VP	☐ DELETE	2.1 TITLE		W. S. C.	Change Addition
NAME	A THE STATE OF THE		2.2 NAME			
STREET ADDRESS	450 FAIRWAY DR. #102		2.3 STREE	T ADDRESS		
CITY-S1-ZIP	DEERFIELD BEACH FL 33441		2.4 CITY-			1
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-			
TITLE		☐ DELETE	41 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME	1		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		:	4.4 CiTY-:	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME		į	5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-1			
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS				ADDRESS		`
CITY-ST-ZIP			6.4 CITY-	1		
	certify that the information supplied wi	th this filing does not qualify for t			Section 119.07(3)(i). Florida Statutes I furt	her certify that the information

indicated on this annual report or supplemental armusi 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 12 or Block 13 if changed, or on an attachment with an address.