

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED 0000006039

04 MAR 30 AM 9:10

SECRETARY OF STATE
TALLAHASSEE FLORIDA

66405337



MOORE CR2E034 (11/03)

DOCUMENT # F0000006039			
1. Entity Name E-ROSH CORP.			
Principal Place of Business 1111 KANE CONCOURSE SUITE 411 BAY HARBOR ISLAND FL 33154		Mailing Address 1111 KANE CONCOURSE SUITE 411 BAY HARBOR ISLAND FL 33154	
2. Principal Place of Business <i>20801 Biscayne Blvd.</i>		3. Mailing Address <i>20801 Biscayne Blvd.</i>	
Suite, Apt. #, etc. <i>306</i>		Suite, Apt. #, etc. <i>306</i>	
City & State <i>Aventura - FL</i>		City & State <i>Aventura - FL</i>	
Zip <i>33180</i>	Country <i>US</i>	Zip <i>33180</i>	Country <i>U.S.</i>
4. FEI Number 65-1049379		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <u><i>President</i></u> DATE <u><i>02/09/2004</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004: Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SERFATI, JACOB 1111 KANE CONCOURSE, STE 411 BAY HARBOR ISLAND FL 33154 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>20801 Biscayne Blvd - Ste. 306 Aventura - FL 33180</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS SERFATI, JACOB 1111 KANE CONCOURSE, STE 411 BAY HARBOR ISLAND FL 33154 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>20801 Biscayne Blvd. - Ste. 306 Aventura - FL 33180</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENARROCH, AQUIBA 21205 YACHT CLUB DR., APT 2904 AVENTURA FL 33180 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 800031550508 03/31/04--01019--019 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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><i>President</i></u>		DATE: <u><i>02/09/04</i></u> DAYTIME PHONE #: <u><i>305-8669797</i></u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			