2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# F53563

Entity Name: ROSE ASSOCIATES, INC. OF MIAMI

Current Principal Place of Business:

C/O ALAN ROSEFIELDE
2135 LAKE AVE., SUNSET ISL. #4
MIAMI BEACH, FL 33140

New Principal Place of Business:

C/O ALAN ROSEFIELDE
2135 LAKE AVE., SUNSET ISL. #4
MIAMI BEACH, FL 33140 US

Current Mailing Address:

C/O ALAN ROSEFIELDE
2135 LAKE AVE., SUNSET ISL. #4
MIAMI BEACH, FL 33140

New Mailing Address:

C/O ALAN ROSEFIELDE
2135 LAKE AVE., SUNSET ISL. #4
MIAMI BEACH, FL 33140 US

FEI Number: 59-2141203 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSEFIELDE, ALAN
2135 LAKE AVE., SUNSET ISL. #4
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

ROSEFIELDE, ALAN P PD
2135 LAKE AVE., SUNSET ISL. #4
MIAMI BEACH, FL 33140 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: ALAN P. ROSEFIELDE 05/01/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROSEFIELDE, ALAN
Address: 2135 LAKE AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROSEFIELDE, ALAN P PD
Address: 2135 LAKE AVENUE
City-St-Zip: MIAMI BEACH, FL 33140 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALAN P. ROSEFIELDE PD 05/01/2005
Electronic Signature of Signing Officer or Director Date