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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F70491

ROCK ROTTOM INC

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FILED								
Mar	11	1998	8:00am					
Se	crei	tary o	f State					

HOOK BOTTOM, INC.					
Principal Place of Business	Mailing Address			C CHROSCOR LITH CRAIN BAIN ANDIR TOWN LIEN MINES AND	II BIEIE BINIS BIREI BINIE INNI
HARDONEO CREEK RD HOROROOG CA BOOK US 6900 S.W. 21 CT #11 DAVIE, FL 33317	6175-B CROOKED CREEK RD NORCROSS GA 30092 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/10/1982	
2. Principal Place of Business	2a. Mailing Address	<u> </u>		4. FEI Number	Applied For
1 6900 SW 21 CT	26			59-2149757	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc). ————————————————————————————————————		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State B DAVIE, FL	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 4 33317 25 USA	Zip 29	30 Co	untry	This corporation owes or has paid the current Personal Property Tax due June 30.	irrent year Intangible
Name and Address of Current Registered Agent				10. Name and Address of New Registered	Agent
ROCHMAN, FRANK 6631 RACQUET CLUB DR LAUDERHILL FL 33319			81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Sections 607.050	22 and 607.1508, Florida S	Statutes, the a	84 City	Floration submits this statement for the purpose attor's board of directors. I hereby accept the ap	65 Zip Code of changing its registered
agent. I am familiar with, and accept the oblig	ations of, Section 607.050	05. Florida Sta	tutes.	allorra board of directora. Thereby accept the ap	bollittuerit as tablistered
SIGNATURE					

12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE STD DELETE Change Addition 1.1 TITLE SCHEIBLE, BEVERLY NAME 1.2 NAME 3893 GLEN MEADOW DR. STREET ADDRESS 1.3 STREET ADDRESS **NORCROSS GA** CITY-ST-ZIP 1.4 CITY-ST-ZIP CD DELETE Change Addition TITLE 2.1 TITLE SCHEIBLE, JEFFREY J 2.2 NAMÉ 3893 GLENMEADOW DR STREET ADDRESS 2.3 STREET ADDRESS NORCROSS, GA 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME ROCHMAN, FRANK 3.2 NAME 6631 RAQUET CLUB DR STREET ADDRESS 3.3 STREET ADDRESS LAUDERHILL FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE FRIO. RICHARD NAME 4. 2 NAME 3050 N CHANDELLE ROAD STREET ADDRESS 4.3 STREET ADDRESS LOS ANGELES CA CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 annual report or suppliemental annual 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.

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