2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G06648

Entity Name: ROSSI'S, INC.

ROSSI, WILLIAM

3325 LAKE ANDERSON AVE.

ORLANDO, FL 32812 US

Name:

Address:

City-St-Zip:

FILED Apr 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: % HENRY ROSSI 5919 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 328094605 **New Mailing Address: Current Mailing Address:** % HENRY ROSSI 5919 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 328094605 FEI Number: 59-2247924 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROSSI, HENRY ROSSI, HENRY 5919 S. ORANGE BLOSSON TRAIL 5919 S. ORANGE BLOSSON TRAIL ORLANDO, FL US ORLANDO, FL 328094605 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: HENRY ROSSI 04/19/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROSSI, HENRY, Name: Name: 1232 LAKE WILLISARA CR. Address: Address: City-St-Zip: ORLANDO, FL 328065582 US City-St-Zip: Title: Title: () Delete () Change () Addition ROSSI, NINA L, Name: Name: 1232 LAKE WILLISARA CR. Address: Address: ORLANDO, FL 328065582 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition ROSSI, RONALD, A, Name: Name: 4100 TERIWOOD AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32812 US City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RONALD ROSSI VT 04/19/2007