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FILED
Sep 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997 Amended 06-15-97

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G99396 (5)

1. Corporation Name

ROSSAKO, INC.
406 Reo Stuite 138, Tampa, Fl. 33609

Principal Place of Business / Mailing Address

Argentina Mejdoub
4721 Tampa Downs Blvd.
Lutz, Fl. 33549

3. Date Incorporated or Qualified: 03/08/84
3a. Date of Last Report: 03-11-97

2. Principal Place of Business
21: 406 Reo St.
22 Suite, Apt. #, etc.: 138
23 City & State: Tampa Fl.
24 Zip: 33609 25 Country: Hillsborough

2a. Mailing Address
26: P.O.Box 7212
27 Suite, Apt. #, etc.: Wesley Chapel
28 City & State: Florida
29 Zip: 33543 30 Country: Pasco

4. FEI Number: 592381050 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ Yes — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Argentina Mejdoub
4721 Tampa Downs Blvd.
Lutz, Fl. 33549

10. Name and Address of New Registered Agent

81 Name: Jan Marie HUGHES
82 Street Address (P.O. Box Number is Not Acceptable): 4721 Tampa Downs Blvd.
83:
84 City: Lutz FL 85 Zip Code: 33549

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.

X SIGNATURE: Jan Hughes — 8-18-97
Signature of new registered agent — Type or printed name of new registered agent, title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND/OR DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T Argentina Mejdoub 4721 Tampa Downs Blvd. Lutz, Fl. 33549	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C Wells, Roger 26724 Hickory LN. Lutz, Fl. 33549	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	H/O Wells, Florinda 26724 Hickory LN. Lutz, Fl. 33549	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition 500002290885 -09/11/97--01103--012 ***8.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 300002290883 -09/11/97--01103--011 ***61.25

RK 9-10-97

CR2E034 (9/96)

14. I do 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 supplemental 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.

SIGNATURE: Jan Hughes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date