


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

APPROVED
AND
FILED

1997 SEP 30 PM 4: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G99396 (5)
1. Corporation Name

ROSSAKO, INC.
406 Reo St. Suite-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.

2a. Mailing Address

26 P.O. Box 7212

Suite, Apt. #, etc.

22 138

Suite, Apt. #, etc.

27 Wesley Chapel

City & State

23 Tampa, Fl.

City & State

28 Florida

Zip

24 33609

Country

25 Hillsborough

Zip

33543

Country

30 Pasco

4. FEI Number

592381050

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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.

SIGNATURE

Jan Marie Hughes

Jan- Marie Hughes, Pres. & Owner

09-17-97

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	S/T	Argentina Mejdoub	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		4721 Tampa Downs Blvd.	
CITY-ST-ZIP		Lutz, Fl. 33549	

TITLE	C	Wells, Roger	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		26724 Hickory LN.	
CITY-ST-ZIP		Lutz, Fl. 33549	

TITLE	H/O	Wells, Florinda	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		26724 Hickory LN.	
CITY-ST-ZIP		Lutz, Fl. 33549	

TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President & Owner	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Jan Marie HUGHES	
1.3 STREET ADDRESS	4721 Tampa Downs Blvd.	
1.4 CITY-ST-ZIP	Lutz, Fl. 33549	<input type="checkbox"/> Change <input type="checkbox"/> Addition

2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE		
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 Marie Hughes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan Marie Hughes, President & Owner

08-11-97

(813) 287-7951

CR2E034 (9/96)