

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

FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # G99396 (5)
 1. Corporation Name
ROSSAKO, INC.



Principal Place of Business 406 REO STREET SUITE 130 TAMPA FL 33609 US	Mailing Address 5113 W. Grace St. Tampa, FL 33607 US	P.O. BOX 7212 WESLEY CHAPEL FL 33543 US
--	---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified 03/08/1984	
4. FEI Number 59-2381050	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
HUGHES, JAN M 4721 TAMPA DOWN BLVD LUTZ FL 33549	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

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 _____ DATE _____
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S T	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEJDOUB, ARGENTINA	1.2 NAME	
STREET ADDRESS	4721 TAMPA DOWNS BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL 33549	1.4 CITY-ST-ZIP	
TITLE	C	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELLS, ROGER	2.2 NAME	
STREET ADDRESS	26724 HICKORY LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL 33549	2.4 CITY-ST-ZIP	
TITLE	H O	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELLS, FLORINDA	3.2 NAME	
STREET ADDRESS	26724 HICKORY LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL 33549	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGHES, JAN M	4.2 NAME	
STREET ADDRESS	4721 TAMPA DOWNS BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL 33549	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: *[Signature]* **EQUIRE PRESIDENT 01-06-98 (813) 282-9951**

CR2E034 (10/97)

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

ISSUE DATE: 12/03/97

LICENSE NO.
B-840053

AUDIT CONTROL NO.
021874

219113

THE AGENCY OR SCHOOL
NAMED BELOW IS LICENSED AND REGULATED
UNDER THE PROVISIONS OF CHAPTER 498, FLORIDA STATUTES, FOR
THE PERIOD EXPIRING JAN 17, 1998



HUGHES, JAN M.
PRESIDENT
HUGHES, JAN M.
PRESIDENT
MEJDOUB, ARGENTINA D.
SECRETARY
MEJDOUB, ARGENTINA D.
SECRETARY
MEJDOUB, ARGENTINA D.
TREASURER

Sandra B. Mortham

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

ISSUE DATE: 12/03/97

LICENSE NO.
A-8500207

AUDIT CONTROL NO.
021869

219108

THE AGENCY OR SCHOOL
NAMED BELOW IS LICENSED AND REGULATED
UNDER THE PROVISIONS OF CHAPTER 498, FLORIDA STATUTES, FOR
THE PERIOD EXPIRING JUN 17, 1998



HUGHES, JAN M.
PRESIDENT
HUGHES, JAN M.
PRESIDENT
MEJDOUB, ARGENTINA D.
SECRETARY
MEJDOUB, ARGENTINA D.
SECRETARY
MEJDOUB, ARGENTINA D.
TREASURER

Sandra B. Mortham