

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H97482

FILED
Apr 29, 2007
Secretary of State

Entity Name: BOB ROCCO ENTERPRISES, INC.

Current Principal Place of Business:

5902 JOHNS RD.
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

5902 JOHNS RD.
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-2635209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROCCO, ROBERT J II
18105 CLEAR LAKE DR
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

ROCCO, ROBERT J II
14016 MIDDLETON WAY
TAMPA, FL 33624 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:

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ROCCO, ROBERT J., II,
Address: 18105 CLEARLAKE DR.
City-St-Zip: LUTZ, FL 33548

Title: VS () Delete
Name: ROCCO, DONNA M.,
Address: 18105 CLEARLAKE DR.
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: ROCCO, ROBERT J., II,
Address: 14016 MIDDLETON WAY
City-St-Zip: TAMPA, FL 33624

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: ROBERT J ROCCO II

PT

04/29/2007

Electronic Signature of Signing Officer or Director

Date