## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

**DOCUMENT #** J59574

(0)

ROSEN	ENTERPRISES.	INC
DUSTN	CIVILEDEDIAEA.	INI

Principal Place of Business 777 EAST 25TH STREET SHITE #314 Mailing Address

777 EAST SETH STORET CHEER HOLD



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						3.	Date Incorporated or Qualified 03/02/1987	3a. Date		t Report /1995
2. Principal Pla	ice of Business	2a. Mailing Address				4.	FEI Number	<u> </u>	<u> </u>	Applied For
21		26					59-2780219			Not Applicable
Suite, Apt. #		Suite, Apt. #, etc				5.	Certificate of Status Desired			75 Additional se Required
City & State		Orty & State				,	Election Campaign Financing Trust Fund Contribution			.00 May Be ided to Fees
Ζφ <b>24</b>	Country 25	Ζφ <b>29</b>	30 Cou	intry			This corporation has liability for i Florida Statutes Yes			
	<ol><li>Name and Address of Current</li></ol>	Registered Agent		Ι.,		10.	Name and Address of New R	egistered	Agent	
į				61	Name					
CANTON M.D., ENRIQUE J. 777 EAST 25TH STREET SUITE #314				82	Street Ad	ddress (P.C	D. Box Number is Not Acceptab	le)		
	IH FL 33013			83						
				84	City				85	Zip Code
11 Pursuant to	the provisions of Sections 60% 050d	and 002 4500 ft 11 01		<u> </u>				FL	1	,
	o the provisions of Sections 607.0502 and agent, or both, in the State of Fload, and accept the obligations of Section	a coca cha ide was autilianse	s. the abc d by the c	ove-n	ration's bo	poration su oard of din	ibmits this statement for the pur ectors. Thereby accept the appo	pose of cha pintment as	inging it register	s registered office red agent. I am
SIGNATURE _	Agriculum typed or printed han ello" registerio Lagont a	ed the stage Hauke the the	F. Begistered	∘ ج.۵ ا	Lagrature raqui	imal who: rer	ofal na	DATE		
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFI		DIREC	TORS IN 12
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NAME	CANTON, ENRIQUE		1.2 NA	AME						
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STREET ADDRESS			4		ADDRESS					
CITY-ST-ZIP			6.4 CH							
	certify that the information supplied wi	tri this filing is voluntarily fumisi	hed and d	does	not qualify	for the ex	emption stated in Section 119.6	7/3\/k) Flor	ido Ptol	tota I forther

certify that the information indicated on this annual report or supplemental annual report is 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 effector of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Plock 13 if changed, or on an atjachment with an address.

SIGNATURE: ~

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/96 (305) 693-6349