

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J59574 (0)
1. Corporation Name
ROSEN ENTERPRISES, INC.



Principal Place of Business 777 EAST 25TH STREET SUITE #314 HIALEAH FL 33013	Mailing Address 777 EAST 25TH STREET SUITE #314 HIALEAH FL 33013
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 15600 N.W. 67 AVE. Suite, Apt. #, etc. 22 # 301 City & State 23 MIAMI LAKES, FL. Zip 24 33134		2a. Mailing Address 26 15600 N.W. 67 AVE. Suite, Apt. #, etc. 27 # 301 City & State 28 MIAMI LAKES, FL. Zip 29 33134		3. Date Incorporated or Qualified 03/02/1987		3a. Date of Last Report 05/01/1996	
				4. FEI Number 59-2780219		Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input 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 type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent CANTON M.D., ENRIQUE J. 777 EAST 25TH STREET SUITE #314 HIALEAH FL 33013				10. Name and Address of New Registered Agent 81 Name CANTON M.D. ENRIQUE J. 82 Street Address (P.O. Box Number is Not Acceptable) 15600 N.W. 67 AVE. SUITE 301 84 City MIAMI LAKES FL 85 Zip Code 33014			
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	CANTON, ENRIQUE	1.2 NAME	CANTON, ENRIQUE
STREET ADDRESS	777 EAST 25TH ST #314	1.3 STREET ADDRESS	15600 N.W. 67 AVE # 301
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP	MIAMI LAKES, FL. 33134
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 _____ (NOTE: Registered Agent signature required when reinstating) 8/29/97 (305) 223-7268

CR2E034 (4/97)