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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K41837 1. Corporation Name

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90034 036 ***150.00

THE RO	SE, INC							
Principal Place	e of Business	Mailing Address		*				
% PEDRO OTANO 1601 FARMINGTON AVE W PALM BCH FL 33414		% PEDRO OTANO 1601 FARMINGTON AVE W PALM BCH FL 33414				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 10/28/1988		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		pplied For
21		26				65-0087387		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	Fee F	Additional Required
City & State		City & State			6. Election Campaign Financing		May Be	
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year		
24	25	1=+1	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent		na si		10. Name and Address of New Registe	rea Agent	
OTANO, PEDRO			ļ	81 Name		(D.O. Bay Number in Net Acceptable)		
1601	FARMINTON AVE			82 St	eet Addre	ss (P.O. Box Number is Not Acceptable)	tion to be a supplied to	
WES	ST PALM BCH FL 33414			83				
	- 1			84 Ci	у		FLII	Code
11. Pursuant office or r	to the provisions of Sections 607-850 egistered agent, or both, in the State	vand 607.1508, Florida Statute of Florida. Such change was au	s, the at thorized	oove-nai	ned corpo corporation	ration submits this statement for the purposn's board of directors. I hereby accept the a	se of changing it appointment as i	egistered
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607-650 egistered agent, or both, in the State out termiliar with and accept the statigation of the state of terminal state of the					oration submits this statement for the purposin's board of directors. I hereby accept the a	27/17	<u></u> '
	/ / ///DOClar	and title if applicable. (NOTE: I	Registered	Agent sign		when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: I	Registered	Agent sign		when reinstating); ! O / AT	27/17	ORS IN 12
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO	and title if applicable. (NOTE: I	13 1.1 TIT 1.2 NA	Agent sign: TLE .ME	ture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE	Singlature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE	and title if applicable. (NOTE: I	13 1.1 TIT 1.2 NA	Agent signi	ture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO	and title if applicable. (NOTE: ID DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT	Agent signi TLE IME REET ADDI TY-ST-ZIP	ture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Singlature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE	and title if applicable. (NOTE: I	13. 1.1 TIT 1.2 NA 1.3 ST	Agent signi TLE IME REET ADDI TY-ST-ZIP	ture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Singlature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE	and title if applicable. (NOTE: ID DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT	Agent signi ILE IME REET ADDI IY-ST-ZIP	ture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE.	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CI 2.1 TIT 2.2 NA	Agent signi ILE IME REET ADDI IY-ST-ZIP	iture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CII 2.1 TIT 2.2 NA 2.3 ST 2.4 CI	Agent signi ILE ME REET ADDI IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP	iture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CII 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT	Agent signi LE ME REET ADDI IY-ST-ZIP LE ME REET ADDI IY-ST-ZIP	iture required	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CII 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA	Agent signi TLE ME REET ADDI TY-ST-ZIP TLE ME REET ADDI TY-ST-ZIP TLE ME	ESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FŁ 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CII 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA	Agent signi LE ME REET ADDI IY-ST-ZIP LE ME REET ADDI IY-ST-ZIP	ESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FŁ 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI	Agent signi ILE ME REET ADDI IY-ST-ZIP ILE MME REET ADDI ITY-ST-ZIP ILE MME REET ADDI ITY-ST-ZIP ILE MME	ESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FŁ 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT	Agent signi ILE ME REET ADDI IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ITY-ST-ZIP ILE	ESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FŁ 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA	Agent signi ILE ME REET ADDI IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ITE AME	EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 ST	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME	EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 ST 4.4 CIT	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME	EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4. CIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 4.5 TIT 4	Agent signi ILE ME REET ADDI IY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE	EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME	EESS EESS EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME ITREET ADDI ITY-ST-ZIP ILE AME	EESS EESS EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	DELETE D	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 4.4 CIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.4 CIT 5.4 CIT 5.4 CIT 5.4 CIT 5.5 CIT 5.6 CIT 5.7 TIT 5.7 NA 5.7 ST 5.4 CIT 5.7 TIT 5.7 NA 5.7 ST 5.7 CIT 5.7 CIT 5.7 TIT 5.7 NA 5.7 ST 5.7 CIT 5.7 TIT 5.7 TIT 5.7 NA 5.7 ST 5.7 CIT 5.7 TIT 5.7 TI	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME ITEET ADDI ITY-ST-ZIP ILE AME ITEET ADDI ITY-ST-ZIP ILE ITEET ADDI ITY-ST-ZIP ILE ITEET ADDI ITY-ST-ZIP ILE ITEET ADDI ITY-ST-ZIP ITEET ADDI ITY-ST-ZIP	EESS EESS EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	and title if applicable. (NOTE: ID DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4 CIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.4 CIT 6.1 TIT 6.1	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE	EESS EESS EESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS ANT D OTANO, PEDRO 1601 FARMINGTON AVE WEST PALM BCH FL 33414	DELETE D	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CIT 3.1 TIT 3.2 NA 3.3 ST 3.4. CIT 4.2 NA 4.3 ST 4.4 CIT 5.1 TIT 5.2 NA 5.3 ST 5.4 CIT 6.1 TIT 6.2 NA	Agent signi ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE ME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE AME REET ADDI ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE ITY-ST-ZIP ILE	EESS RESS RESS	when reinstating); ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition Addition Addition

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 attackment with an appears, with all other like empowered.

SIGNATURE: