2008 FOR PROFIT CORPORATION

FILED 00 AN tate

ANNUAL REPORT					Mar 31, 2008 08:0			
1. Entity Name	MENT # K84544 ROCK ENTERPRISES, INC.				,	Secre	tary of St	
Principal Place C/O WILLIAM 1626 PARAD ASTOR, FL 3	G HOUSE ISE LANE	Mailing Address C/O WILLIAM G HOUSE 1626 PARADISE LANE ASTOR, FL 32102 US						
	ANOTANDITE	IN THE COA		01052008	No Chg-P	CR2E034		
U	O NOT WRITE	IN THIS SPA		 FEI Number 59-2950 Certificate 			Applied For Not Applicable 8.75 Additional se Required	
	6. Name and Address of Current Re	gistered Agent		•			Ne required	
HOUSE, W 1626 PARA ASTOR, FI	ADISE LANE	Pro Vince		NOT W				
the obligati	named entity submits this statement for the constant of registered agent. Signature, typed or printed name of registered agent and		ed office or register		h, in the State of F	lorida. I am far	niliar with, and accept	
Signature, typed or printed name of registered agent and title FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finar Trust Fund Contribution.		00 May Be ad to Fees) 20000876 200-200	048 50 013 450 •	
10.	 	RECTORS		47		 	0.013 150.0	
NAME STREET ADDRESS CITY-ST-ZIP	PSTD HOUSE, WILLIAM G 1626 PARADISE LN. ASTOR, FL 32102							
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	VRITE		
NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS S	PACE		
TITLE		· · · · · · · · · · · · · · · · · · ·			t si e			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: William G. House WM, W. /

03/28/08 352-759-2362 Daytome Phone #