2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L17952

ROSEN PLAZA, INC.

Principal Place of Business

9840 INTERNATIONAL DR 7600 INTERNATIONAL DRIVE ORLANDO, FL 32819 US Mailing Address

9840 INTERNATIONAL DR 7600 INTERNATIONAL DRIVE ORLANDO, FL 32819 US

FILED Feb 02, 2004 08:00 AM Secretary of State



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01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2972838

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSEN, HARRIS 7600 INTERNATIONAL DRIVE ORLANDO, FL 32819

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8. The above the obligat	named entity submits this statement for the pations of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and tale if applicable. (NOTE, Registered Agent signature required when retristating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financial Trust Fund Contribution.	9 🗆	\$5.00 May Be Added to Fees	000000024756 02/02/04-80078-014 150.00
10.	D. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSEN, HARRIS 7600 INTERNATIONAL DR. ORLANDO, FL				
Trile Name Street address City-St-Zip	V GARRITT, TOOHEY 9840 INTERNATIONAL DR. ORLANDO, FL 32819				
TITLE NAME STREET AODRESS ORY-ST-ZIP	ST SANTOS, FRANK 9840 INTERNATIONAL DR. ORLANDO, FL 32819	<u> </u>		DO NOT WRITE	
TITLE NAME SIREET ADDRESS CITY-SI-ZIP		-	IN THIS SPACE		
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 export as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachipment with an address, with all other like empowered.

1/21/04

SIGNATURE:

CXTY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-996-9840

Data

Daytime Phone #