

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 22, 2004 08:00 AM
Secretary of State**

DOCUMENT # M31057

1. Entity Name
MARK ROSNER, INC.



Principal Place of Business
**724 PARK CT
HOLLYWOOD, FL 33020**

Mailing Address
**PO BOX 22-1383
HOLLYWOOD, FL 33022-1383**



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2668713	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROSNER, MARK
724 PARK CT
HOLLYWOOD, FL 33020**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ROSNER, MARK
STREET ADDRESS	724 PARK CT
CITY - ST - ZIP	HOLLYWOOD, FL
TITLE	T
NAME	ROSNER, GERALDINE
STREET ADDRESS	724 PARK CT
CITY - ST - ZIP	HOLLYWOOD, FL 33020
TITLE	V
NAME	ROSNER, HEATHER
STREET ADDRESS	851 FELL STREET
CITY - ST - ZIP	SAN FRANCISCO, CA 94117
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000010404
01/22/04-80031-002 150.00

**DO NOT WRITE
IN THIS SPACE**

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 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.

SIGNATURE: Mark Rosner, Pres. MARK ROSNER PRES. 1/20/4 954.921-6610
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #