## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M43378

FILED Jan 12, 2004 Secretary of State

Entity Name: ROESONS INSURANCE SERVICES, INC.

| Current P  | rincipal Place o   | of Business:  | New Prince  | cipal Place               | e of Business:  |
|--|--|---|---|---------------------------|---|
|  | 79TH COURT   |   |   |                           |   |
| SUITE 102<br>/IIAMI LAP  | Z<br>KES, FL 33016   | US  |   |                           |   |
| Current M  | lailing Address  | :   | New Mail  | ing Addres                | ss:   |
| 5280 NW  | 79TH COURT   |   |   |                           |   |
| SUITE 102  |  | US  |   |                           |   |
|  | : 59-2800733   | FEI Number Applied For ( )  | FEI Number Not App  | licable ( )               | Certificate of Status Desired ( )   |
| lame and   | l Address of Cu  | ırrent Registered Agent:  | Name and  | l Address                 | of New Registered Agent:  |
|  |  |   | rum um  | .,                        | or non neglocolou , igolici   |
| 3450 WE<br>SUITE 150   | OLDSTEIN LLC<br>ST SUNRISE BO<br>)<br>, FL 33323 US  | OULEVARD  |   |                           |   |
|  | e named entity รเ<br>e of Florida.   | ubmits this statement for the                                       | purpose of changing   | its registere             | ed office or registered agent, or b   |
| o olali  |  |   |   |                           |   |
|  | RE:  |   |   |                           |   |
|  |  | s Signature of Registered Ac  | gent  |                           | Date  |
| SIGNATUI   | Electronic   | c Signature of Registered Ac<br>Trust Fund Contribution ( ).        | gent  |                           | Date  |
| SIGNATUI   | Electronic   | Trust Fund Contribution ( ).  |   | NS/CHANG                  | Date BES TO OFFICERS AND DIREC  |
| Election Car<br>DFFICER:<br>itle:<br>lame:<br>ddress:  | Electronic   | Trust Fund Contribution ( ).  ORS: Delete  AVENUE                   |   | NS/CHANG                  |   |
| Election Car<br>DFFICER:<br>itle:<br>lame:<br>ddress:<br>city-St-Zip:<br>itle:<br>lame:<br>ddress: | Electronic mpaign Financing  S AND DIRECT  P ()E ROE, BRIAN D 15401 SW 82ND MIAMI, FL 33157  | Trust Fund Contribution ( ).  ORS: Delete  AVENUE 7 Delete          | <b>ADDITIOI</b> Title: Name: Address:                             | D<br>ROE, CHR             | ( ) Change ( ) Addition  (X) Change ( ) Addition  (X) Change ( ) Addition  ISTOPHER 82ND AVENUE |
| SIGNATUI   | Electronic mpaign Financing  S AND DIRECT  P () E  ROE, BRIAN D  15401 SW 82ND  MIAMI, FL 33157  D () E  ROE, ADRIAN V  6 FORT STREET  BELIZE CITY, BE | Trust Fund Contribution ( ).  ORS: Delete AVENUE 7 Delete ELIZE, OC | ADDITIOI Title: Name: Address: City-St-Zip: Title: Name: Address: | D<br>ROE, CHR<br>15401 SW | ( ) Change ( ) Addition  (X) Change ( ) Addition  (X) Change ( ) Addition  ISTOPHER 82ND AVENUE |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN D. ROE P 01/12/2004