2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 08:00 AM
Secretary of State

DOCUMENT # N97000001180

1. Entity Name
ROCKIN' RENEGADES, INC.

Principal Place of Business	Mailing Address
15140 WHETSTONE WAY FT LAUDERDALE, FL 33331	15140 WHETSTONE WAY FT LAUDERDALE, FL 33331

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01272004 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-0739285
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

YARBOROUGH, VIKKI
15140 WHETSTONE WAY
FT LAUDERDALE, FL 33331

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000076361
03/05/04-80023-004 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	YARBOROUGH, VIKKI
STREET ADDRESS	15140 WHETSTONE WAY
CITY-ST-ZIP	FT LAUDERDALE, FL 33331
TITLE	D
NAME	BAKER, BECKIE
STREET ADDRESS	4481 N W 3RD COURT
CITY-ST-ZIP	COCONUT CREEK, FL 33066
TITLE	D
NAME	PRECANICO, STACI
STREET ADDRESS	1898 CAPESIDE CIRCLE
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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 617, 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: Beckie Baker 3/2/04 954-745-6105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #