


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000021319 1. Entity Name ROCKS & RUGS, INC.	
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Principal Place of Business 1711 SAN MARCO ROAD MARCO ISLAND, FL 34145	Mailing Address 1711 SAN MARCO ROAD MARCO ISLAND, FL 34145
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DO NOT WRITE IN THIS SPACE



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1082037	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PASCALE, BILL 1711 SAN MARCO RD MARCO ISLAND, FL 34145

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD PASCALE, WILLIAM 1711 SAN MARCO ROAD MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY ST ZIP	VD PASCALE, CHRISTOPHER 1711 SAN MARCO ROAD MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY ST ZIP	VD PASCALE, GREGORY 1711 SAN MARCO ROAD MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY ST ZIP	STD PASCALE, MICHAEL 1711 SAN MARCO ROAD MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

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02/05/05-80024-017 158.75

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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: <u>Michael Pascale</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	7/2/05 <small>Date</small>	239-825-4777 <small>Daytime Phone #</small>
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