2004 FOR PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business Mailing Address 1002 N. MONROE ST. 100	DOCUMENT # P01000061908 1. Entity Name ROSSELLINI INC.					VISION OF CORPORATION			
Malling Address TALLAHASSEE, FL 32303 TALLAH		•			7	04 AUG	25 PM 1:00		
TALLAHASSEE, FL 32303	Principal Place	e of Business	Mailing Address		-		111 4.09		
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S. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 3. Joseph Hughes Street Address (P.O. Box Number is Not Acceptable) 4913 N. Monroe Street City Tallahassee FL 23 2333 8. The above named entity submis this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda. I am familiar with, and accept me obligations of registered agent, or both, in the State of Forda.	TALLAMASSEE		TALLAMASSEE			,			
S. Name and Address of New Registered Agent J. Joseph Hughes Street Address (P.O. Box Number is Not Acceptable) 1. Joseph Hughes Street Address (P.O. Box Number is Not Acceptable) 4913 N. Monroe Street City Tallahassee FL Zig 2036 3 8. The above named entity submit this statement for the purpose of changing its registered office or registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered Agent submit in the State of Forida. I am lamiliar with, and accept me obligations of registered Agent submit in the State of Forida. I am lamiliar with, and accept me obligations of registered Agent submit in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered Agent submit with a state of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in the State of Forida. I am lamiliar with, and accept me obligations of registered agent, or both in	Zip Country 32309 USA		20 30 9 Country		5. Certificate				
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