2008 FOR PROFIT CORPORATION

STREET ADDRESS

SIGNATURE:

Mar 31, 2008 08:00 AN **ANNUAL REPORT Secretary of State** DOCUMENT # P010000627477 1. Entity Name ROCQUE DI DOMENICO, INC. Principal Place of Business Mailing Address **6230 HAMPTON CT NORTH** 5401 CENTRAL AVE. ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33710 CR2E034 (11/05) 01292008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3735702 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCATEE, CAROL DO NOT WRITE ACCOUNTING CONSULTANTS 5401 CENTRAL AVENUE IN THIS SPACE ST PETERSBURG, FL 33710 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITI F NAME DI DOMENICO, ROCQUE 6230 HAMPTON CT NORTH STREET ADDRESS ST PETERSBURG, FL 33710 CITY-ST-7IP TITLE NAME STREET ADDRESS City-St-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE . NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNING OFFICER OR DIRECTOR

H HMUIULLA

FILED