2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State
03-22-2006 90015 003 ***150.00

DOCUMENT # P01000082878

1. Entity Name
ROVONNE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2582 W SARATOGA DRIVE COOPER CITY, FL 33026	~~2701 N HIATUS ROAD #126 COOPER CITY, FL 33026~~

01312006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
2582 W-Saratoga Dr	2582 W. Saratoga Dr
Suite, Apt. #, etc. Cooper City Fl.	Suite, Apt. #, etc.
City & State Fl.	City & State Cooper City Fl.
Zip 33026 Country Broward	Zip 33026 Country Broward

4. FEI Number 65-1131525 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EVANS, YVONNE 2582 W SARATOGA DRIVE COOPER CITY, FL 33026	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRAZIER, RONALD E 2125 BISCAYNE BLVD MIAMI, FL 33137	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, YVONNE H 2582 W SARATOGA DRIVE COOPER CITY, FL 33026	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: Yvonne Evans 3/31/06 954-296-8858
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

66008986 3-10-06.

#P01000082878

I have ask for this address

to be change TO

2582 - 11 - Saratoga St.

Cooper City

FL 33026.

Thanks.

Yvonne Evans.