

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000089025

Entity Name: ROCK PRESS, INC.

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

4611 S. UNIVERSITY DR
#450
FORT LAUDERDALE, FL 33328

New Principal Place of Business:

Current Mailing Address:

201 S. BISCAYNE BOULEVARD
SUITE 1700
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-1153115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAMI CENTER REGISTERED AGENTS, LLC
201 SOUTH BISCAYNE BLVD., SUITE 1700
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KELLJCHIAN, JOSEPH
Address: 5031 S.W. 160 AVE
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: VST () Delete
Name: BROUSSARD, TRACEY
Address: 700 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH KELLJCHIAN

P

04/07/2005

Electronic Signature of Signing Officer or Director

_____ Date