2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094671

Entity Name: ROCK NETWORKS, INC.

FILED Mar 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8895 MILITARY TRAIL 2109 SE LENNARD RD. #302C PORT ST. LUCIE, FL 34952

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

5500 MILITARY TRAIL
SUITE 22-106
JUPITER, FL 33458

2109 SE LENNARD RD.
PORT ST. LUCIE, FL 34952

FEI Number: 65-1137304 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LETTERA, FRANK A

820 SW MARSH HARBOR BAY
PORT ST. LUCIE, FL 34986 US

LETTERA, FRANK A

1365 SW ACKARD AVE.
PORT ST. LUCIE, FL 34953 US

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: FRANK A. LETTERA 03/02/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR () Delete Title: MR (X) Change () Addition

Name:FRANK, LETTERA AName:FRANK, LETTERA AAddress:820 SW MARSH HARBOR BAYAddress:1365 SW ACKARD AVE.City-St-Zip:PORT ST LUCIE, FL 34986City-St-Zip:PORT ST LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: FRANK A. LETTERA MR. 03/02/2006