2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2008 8:00 am Secretary of State

04-15-2008 90011 037 ***150.00

DOCUMENT # P01000099833 1. Entity Name ROCA CORPORATION					04-15-2008 90011 037 ***150.00					
Principal Plac	e of Business	Mailing Address								
104 CRANDON BLVD 302		104 CRANDON BLVD					50000	# O o		
KEY BISCAYNE, FL 33149		302 KEY BISCAYNE, FL 33149			50002488					
2 Principal P	fone of Business - No D.O. Boy #	3. Mailing Address								
2. Principal Place of Business - No P.O. Box #		104 CRANDO	N BLV	. αν.				JU SAJAN IDARA ILIND NINGBAH NI SUUN		
Suite, Apt. #, etc. SUITE 302		Suite, Apt. #, etc.		0326200		Chg-P CR2E034 (034 (12/06)	2/06)	
City & State		City & State KEY BISCAYNE .			4. FEI Numb				oplied For	
KEY	BISCAY NE FL Country	, <u>y y y , , , , </u>	E , F L		65-114			\$8.75 Add	t Applicab	
33149			ISA		5. Certificate	of Status Desired	d 🗆	Fee Require		
	6. Name and Address of Current I	Registered Agent	Nome			Address of Nev		Agent		
ROA, ANIBAL				Name ANIBAL ROA V.						
104 CRANDON BLVD KEY BISCAYNE, FL 33149			Street A	Street Address (P.O. Box Number is Not Acceptable)						
KET DIGO	ATNE, FE 33149		SUL		302					
				EY	BISCA	IRIE	FL	Zip Cod	e u q	
	named entity submits this statement for	the purpose of changing its regi					Florida. I am	familiar with,	and accer	
the obligat	ions of registered agent.									
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable (NOTE: Beg	istered Agent signat	lure required	when minstation)		DATE	-01-0	9	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaign F Trust Fund Contribut			.00 May Be ed to Fees					
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO C	FFICERS AN	D DIRECTOR	S IN 11	
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NAME STREET ADDRESS	ROA, ANIBAL 971 CRANDON BLVD. APTO. 12	08	NAME STREET ADDRESS	IOH	BAL ROA CRANDO	N BLV D.	SUITE.	302		
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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 in changed, or on an attachment with an address, with all other like empowered.