2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2008 08:00 AN Secretary of State

Daytime Phone #

ANNOAL ILI OKI				-	Apr 24, 2008 08:00
DOCUMENT # P01000105703 1. Entity Name TWINROSE, INC.			Secretary of Star		
Principal Place of Business Mailing Address 1508 CYPRESS DRIVE 1508 CYPRESS DRIVE					
JUPITER, FL	33469)	UPITER, FL 33469 -			
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DO NOT WRITE IN THIS SPACE				01102008 4. FEI Numbe 02-055	5960 Not Applicable
	6. Name and Address of Current Regis	stand Agent		5. Certificate	of Status Desired Fee Required
WHITE, HARVEY A 1508 CYPRESS DRIVE JUPITER, FL 33458			DO NOT WRITE IN THIS SPACE		
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					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				.00 May Be ed to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD WHITE, HARVEY A 1508 CYPRESS DR JUPITER, FL 33469				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000918866 05/13/08-80100-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
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or the cor	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	d to execute this report as requir	mptions contained ure shall have the s ed by Chapter 607	in Chapter 119 same legal effec Florida Statute	Fiorida Statutes. I further certify that the information as if made under oath; that I am an officer or directors; and that my name appears in Block 10 or Block 11 if

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR