


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 24, 2004 08:00 AM
Secretary of State

ck # 1170

DOCUMENT # P02000005129	
1. Entity Name ROCOR INDUSTRIES, INC.	

Principal Place of Business 16405 WEST COLONIAL DRIVE OAKLAND, FL 34787	Mailing Address P O BOX 120355 CLERMONT, FL 34712
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01202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 80-0031300	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LANGLEY, R B 16405 WEST COLONIAL DRIVE OAKLAND, FL 34787

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LANGLEY, R B 16405 W COLONIAL DR OAKLAND, FL 34787
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALEVER, CARY J 16405 W COLONAIL DR OAKLAND, FL 34787
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOYATT, ROBERT C 16405 W COLONIAL DR OAKLAND, FL 34712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/26/04-80019-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: RB Langley 1/20/04 4076548801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #