2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000010813

Entity Name: ROSEBUD HOLDINGS, INC.

FILED May 01, 2004 Secretary of State

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

1111 BISCAYNE BLVD SUITE 2107 11111 BISCAYNE BLVD, SUITE 2107

MIAMI, FL 33181 MIAMI, FL 33181

Current Mailing Address: New Mailing Address:

1111 BISCAYNE BLVD SUITE 2107 11111 BISCAYNE BLVD, SUITE 2107

MIAMI, FL 33181 MIAMI, FL 33181

FEI Number: 04-3616205 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:

TRUTE, MELVYN GOLDSTEIN, JACK CPA 1090 KÁNE CONCOURSE SUITE 202 3391 SW 131 TERRACE BAY HARBOR ISLANDS, FL 33154 DAVIE, FL 33330

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: JACK GOLDSTEIN 05/01/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete RISEN, GEOFFREY RISEN, GEOFFREY M Name: Name:

1111 BISCAYNE BLVD SUITE 2107 11111 BISCAYNE BLVD, SUITE 2107 Address: Address:

City-St-Zip: MIAMI, FL 33181 City-St-Zip: MIAMI, FL 33181

() Delete Title: ٧S Title: VS (X) Change () Addition

RISEN, SONDRA Name: Name: RISEN, SONDRA

11111 BISCAYNE BLVD. Address: 11111 BISCAYNE BLVD, SUITE 2107 Address:

MIAMI, FL 33181 MIAMI, FL 33181 City-St-Zip: 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: GEOFFREY M RISEN 05/01/2004 D