## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2006 08:00 AN Secretary of State DOCUMENT # P02000039167 ROS AND DAVE, INC. Principal Place of Business Mailing Address 10777 NW 41 ST 10777 NW 41 ST MIAMI, FL 33178 MIAMI, FL 33178 01132006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3647966 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODRIGUEZ, DAVID DO NOT WRITE 10777 NW 41ST MIAMI, FL 33178 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. Signature, lyped or orinted name of moistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE HNN0MN534963 FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Figancing \$5.00 May Be 05/08/06-80034-003 150.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE RODRIGUEZ, DAVID NAME STREET ADDRESS 10777 NW 41ST MIAMI, FL 33178 CITY-ST-ZIP TITLE MASCIO, ROSEMARY NAME STREET ADDRESS 10777 NW 41ST CITY-ST-ZIP MIAMI, FL 33178 TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 of 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: DAVID RODNIGUEZ

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

106 Date

<u> 305-4689888</u>

Daytime Phone #