

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000048736

1. Entity Name
ROCKLINE VAC SYSTEMS NORTH, INC.



Principal Place of Business

2580 SW 32 STREET
FT LAUDERDALE, FL 33312

Mailing Address

2580 SW 32 STREET
FT LAUDERDALE, FL 33312



03012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0691986

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, JOHN
2580 SW 32 STREET
FT LAUDERDALE, FL 33312

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FERNANDEZ, JOHN
STREET ADDRESS	2580 SW 32 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	D
NAME	STUCKY, HEATHER
STREET ADDRESS	5911 STRATTON LN
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	D
NAME	DEAN, THOMAS
STREET ADDRESS	1777 SE 15 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33316
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000258228
03/10/05-80030-022 150.00

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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)(f), 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/7/05

Daytime Phone #