

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 26, 2004 8:00 am
Secretary of State

08-26-2004 90002 004 ***300.00

DOCUMENT # P02000064053			
1. Entity Name ROC DESIGNS INC.			
Principal Place of Business 7220 HEATH DRIVE PORT RICHEY FL 34668		Mailing Address 7220 HEATH DRIVE PORT RICHEY FL 34668	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E034 (4/04)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
OTIS, RONALD 7220 HEATH DRIVE PORT RICHEY FL 34668		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code

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 \$550.00 DUE BY September 8, 2004 Make Check Payable to Florida Department of State.	S. 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input checked="" type="checkbox"/>	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT OTIS, RONALD 7220 HEATH DRIVE PORT RICHEY FL 34668 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **RONALD OTIS** **8-26-04** **727-236-0347**

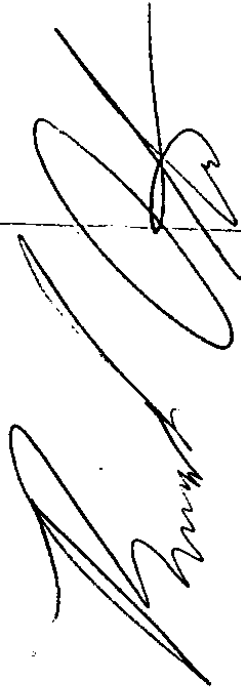
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TO WHOM THIS MAY CONCERN,

I AM WRITING THIS LETTER TO ASK FOR A WAIVER OF THE 400 DOLLAR FINE FOR A LATE CHARGE. I DID NOT GET THE ANNUAL REPORT. THIS IS MY FIRST YEAR AS A CORPORATION. I UNDERSTAND I NEED TO DO THIS EVERY YEAR AND IT NEEDS TO BE DONE BY THE END OF MAY. I HAVE ENCLOSED A CHECK FOR 300 DOLLARS. PLEASE CALL ME IF I CAN HELP MY CASE BY ANSWERING ANY QUESTIONS.

THANK YOU FOR YOUR TIME

RONALD OTIS
OWNER/PRESIDENT
ROC DESIGNS INC



~~Attachment~~

54069974
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8/24/2004