

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000116674	
1. Entity Name ROS FAMILY ENTERPRISE, INC.	

Principal Place of Business 4330 SHERIDAN ST. 202B HOLLYWOOD, FL 33021-1406	Mailing Address 4330 SHERIDAN ST. 202B HOLLYWOOD, FL 33021-1406
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04092005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2302093	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SERRANO, RAUL O 4330 SHERIDAN ST. STE. 202B HOLLYWOOD, FL 33021

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

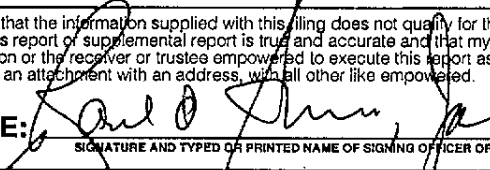
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SERRANO, RAUL O JR. 4330 SHERIDAN ST., STE. 202B HOLLYWOOD, FL 330211406
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SERRANO, LAZARINA C 4330 SEHRIDAN ST., STE. 202B HOLLYWOOD, FL 330211406
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/14/05-80022-015 150.00

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 of 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:  **RAUL O. SERRANO, JR.** 4-8-05 954-987-4878
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #