

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 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



04182008 No Chg-P CR2E034 (11/05)

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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000913438
05/08/08-80036-011 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SERRANO, RAUL O JR.
STREET ADDRESS 4330 SHERIDAN ST., STE. 202B
CITY-ST-ZIP HOLLYWOOD, FL 330211406

TITLE STD
NAME SERRANO, LAZARINA C
STREET ADDRESS 4330 SEHRIDAN ST., STE. 202B
CITY-ST-ZIP HOLLYWOOD, FL 330211406

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

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 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 title empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAUL O. SERRANO, JR.

4-18-08 954-987-4878

Date

Daytime Phone #