2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000135522

Entity Name: LA ROCCA REAL ESTATE INVESTMENT CORP.

FILED Nov 14, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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28640 S.W. 146 AVE. HOMESTEAD, FL 33033

Current Mailing Address: New Mailing Address:

28640 S.W. 146 AVE. HOMESTEAD, FL 33033

FEI Number: 51-0438720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CONINE, MERLAND J
2871 SUNRISE LAKES DRIVE E.
SUNRISE, FL 33322 US

RICHARD, LAROCCA M
28640 SW 146 AVENUE
HOMESTEAD, FL 33033 US

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.

SIGNATURE: RICHARD M. LAROCCA 11/14/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: D (X) Change () Addition
Name: LAROCCA, RICHARD M
Address: 28640 S W 146 AVE

 Address:
 28640 S.W. 146 AVE.
 Address:
 28640 S.W. 146 AVE.

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: D () Delete Title: () Change () Addition Name: LAROCCA, CHRISTINA I Name:

 Name:
 LAROCCA, CHRISTINA I
 Name:

 Address:
 28640 SW 146TH AVE
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LAROCCA, RICHARD M JR
 Name:

 Address:
 28640 SW 146TH AVE
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:

Title: () Delete Title: T () Change (X) Addition

 Name:
 Name:
 LAROCCA, BENNY

 Address:
 Address:
 5013 FALLING LEAF TRL

 City-St-Zip:
 City-St-Zip:
 NORTH SYRACUSE, NY 13212

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD M. LAROCCA D 11/14/2005