

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

05-24-2004 90008 001 ***150.00

14022787



03132003 Chg-P CR2E034 (10/03)

4. FEI Number 20-0195215 Applied For ☐ Not Applicable ☒

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

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

DOCUMENT # P03000074312	
1. Entity Name ROSSELLO & ASSOCIATES, INC.	

Principal Place of Business 10329 CROSS CREEK BLVD SUITE 0 TAMPA, FL 33647	Mailing Address 10329 CROSS CREEK BLVD SUITE 0 TAMPA, FL 33647
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2. Principal Place of Business <u>10329 Cross Creek Blvd Ste 0</u> Suite, Apt. #, etc. <u>Suite 0</u> City & State <u>Tampa FL</u> Zip <u>33647</u> Country <u>Hillsborough L</u>	3. Mailing Address <u>10329 Cross Creek Blvd.</u> Suite, Apt. #, etc. <u>Suite 0</u> City & State <u>Tampa FL</u> Zip <u>33647</u> Country <u>Hillsborough L</u>
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6. Name and Address of Current Registered Agent ROSSELLO, RUTH E 6612 PERPETUAL LANE ZEPHYRHILLS, FL 33544	
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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 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS ROSSELLO, RUTH E 6612 PERPETUAL LANE ZEPHYRHILLS, FL 33544 <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	V ROSSELLO, ANGELO 6612 PERPETUAL LANE ZEPHYRHILLS, FL 33544 <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: Ruth E Rosello Ruth E. Rosello 5-19-04 813-994-1143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

5.19.04

Attachment

To Whom It May Concern:

14022787
#P03000074312

Company leasing Suite B just dropped off an armload of mail to me, including the postcard with the Annual Report Notice.

I have not received anything else prior to this date

Please make change to my address. Suite O.

Thank you,

Ruth Rossell