## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT FILED Mar 02, 2007 08:00 A Secretary of State DOCUMENT # P03000124690 1. Entity Name ROCK'S CONCRETE FINISHING, INC. Principal Place of Business Mailing Address 7139 LAGO STREET 7139 LAGO STREET SARASOTA, FL 34241 SARASOTA, FL 34241 02252007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0380270 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANDRLE, ROCK C DO NOT WRITE 7139 LAGO STREET SARASOTA, FL 34241 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 DATE (NOTE: Registered Agent signature required when reinstating) U00000653793 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 03/13/07-80036-007 150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE NAME ANDRLE, ROCK C STREET ADDRESS 7139 LAGO STREET CITY-ST-ZIP SARASOTA, FL 34241 TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS DO NOT WRITE CITY+ST-ZIP IN THIS SPACE TITLE かいとうきょう さいいかね 11,70 18 737, 15-57 NAME CHARLEST M. CO.C. STREET ADDRESS CITY-ST-ZIP TITLE NAME 16 2377 1 STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby 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 like empowered.

SIGNATURE:

NAME
STREET ADDRESS
CITY-ST-ZIP

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MING DESIGN OR DIRECTOR

7 120101

Daytime Phone #