



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90096 014 ***150.00

DOCUMENT # P03000126887 1. Entity Name RED ROCK INVESTMENTS, INC.					
Principal Place of Business 1441 NW NORTH RIVER DR. MIAMI, FL 33125			Mailing Address 1441 NW NORTH RIVER DR. MIAMI, FL 33125		
2. Principal Place of Business P.O. Box 14-3678 Suite, Apt. #, etc.		3. Mailing Address P.O. Box 14-3678 Suite, Apt. #, etc.		4000000000 	
City & State Coral Gables, FL		City & State Coral Gables, FL		4. FEI Number 27-0070378	
Zip 33114-3678		Zip 33114-3678		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Country USA		Country USA		04122006 Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent ZELAYA, MARIA A 1441 NW NORTH RIVER DR. MIAMI, FL 33125				7. Name and Address of New Registered Agent Name Rosado, Vivian Street Address (P.O. Box Number is Not Acceptable) 3059 Grand Ave. Ste 340 City Coconut Grove FL Zip Code 33133	
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 <u><i>Vivian Rosado, President</i></u> 4/17/06 DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSADO, VIVIAN 1441 NW NORTH RIVER DR. MIAMI, FL 33125	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ZELAYA, MARIA A 1441 NW NORTH RIVER DR. MIAMI, FL 33125	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, CORALIA J 1441 NW NORTH RIVER DR. MIAMI, FL 33125	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Concepcion Rosado P.O. Box 14-3678 Coral Gables, FL 33114-3678	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Director only - D	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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 like empowered.					
SIGNATURE: <u><i>Vivian Rosado, President</i></u> 4/17/06 305.609.8528					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					