


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P05000012431</b>		
1. Entity Name RORANCO MANAGEMENT GROUP, INC.		
Principal Place of Business 1101 N. LAKE DESTINY DRIVE, SUITE 400 MAITLAND, FL 32751	Mailing Address 1101 N. LAKE DESTINY DRIVE, SUITE 400 MAITLAND, FL 32751	



04182007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-2312817	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  FAUD NAKHLEH, RIZKALLAH 1101 N. LAKE DESTINY DRIVE, SUITE 400 MAITLAND, FL 32751
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAPA, RANA F 1101 N. LAKE DESTINY DRIVE, SUITE 400 MAITLAND, FL 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAKHLEH, RIZKALLAH FUAD 1101 N. LAKE DESTINY DRIVE, SUITE 400 MAITLAND, FL 32751
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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 I am empowered.

SIGNATURE: Rizkallah Nakhleh 4/20/07 407-468-1918  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #