2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076989

Entity Name: ROSAL CORPORATION

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

795 SE PORT ST LUCIE BLVD 8420 S. US HIGHWAY 1 #3 LAKES PLAZA

PORT ST LUCIE, FL 34984 PORT ST LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

8418 S US HWY 1 8420 S. US HIGHWAY 1

PORT ST LUCIE, FL 34952 LAKES PLAZA
PORT ST LUCIE, FL 34952

FEI Number: 20-2901724 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BIRAN C HERNDON PA
8418 S US HWY 1
8420 S. US HIGHWAY 1

PORT ST LUCIE, FL 34952 US LAKES PLAZA
PORT ST LUCIE, FL 34952 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: BIRAN C HERNDON 07/05/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 VACHON, ROGER
 Name:
 VACHON, ROGER

 Address:
 3734 SAWGRASS DRIVE
 Address:
 2800 DECLARATION CIRCLE

 City-St-Zip:
 TITUSVILLE, FL 32780
 City-St-Zip:
 LAGO VISTA, TX 78645

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

Name: VACHON, SALLY Name: VACHON, SALLY

Address: 3734 SAWGRASS DRIVE Address: 2800 DECLARATION CIRCLE City-St-Zip: LAGO VISTA, TX 78645

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROGER VACHON PD 07/05/2007