## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Aug 29, 2006 8:00 am Secretary of State DOCUMENT # P05000095236 1. Entity Name 08-29-2006 90005 010 \*\*\*150.00 J ROSSINA CORP Principal Place of Business Mailing Address 2820 NE 201 TERRACE BDG F APT 323 AVENTURA FL 33180 US 2820 NE 201 TERRACE BDG F APT 323 AVENTURA FL 33180 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) City & State 4. FEI Number Applied For City & State 20-3100649 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUMKIN, JULIA A ... 2820 NE 201 TERRACE Street Address (P.O. Box Number is Not Acceptable) BDG F APT 323 AVENTURA FL 33180 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$550.00 \$.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 6, 2006 late fee. By checking this box, the corporation certifies it did Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State not receive prior notice. Fee to file is \$150.00. 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition RUMKIN, JULIA A NAME 2820 NE 201 TERRACE BDG F STE 323 STREET ADDRESS STREET ADDRESS **AVENTURA FL 33180** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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

**SIGNATURE:** 

YOU TO WAY 07, 30, 06
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

## **ATTACHMENT**

08.06.2006

To: Division of Corporations Annual Report Section P. O. Box 6850 Tallahassee, Fl 32314

From: J Rossina Corp. 2820 NE 201 Terrace BLG-F Apt. 323 Aventura, FL 33180 40102091 #P85880095236

## To Whom It May Concern:

Dulla Rumber

This letter is in regards to the annual report late fee filing. I kindly ask you to wave \$400 late fee. I was not aware that the payment was due since I have never received annual report notice this year.

Sincerely,

Julia A Rumkin The President