


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007 8:00 am
Secretary of State

01-24-2007 90042 016 ***150.00

DOCUMENT # P05000160585 1. Entity Name ROCHESTER HOT DOGS INC.					
Principal Place of Business 5329 SUMMERLIN ROAD APT # 8 FORT MYERS, FL 33919			Mailing Address 5329 SUMMERLIN ROAD APT # 8 FORT MYERS, FL 33919		
2. Principal Place of Business - No P.O. Box # 1400 ESTERO BLVD. Suite, Apt. #, etc.		3. Mailing Address 2040 SE 16TH ST Suite, Apt. #, etc.			
City & State FORT MYERS BEACH, FL		City & State CAPE CORAL FL		4. FEI Number 20-3907684	
Zip 33931		Country LEE		Zip 33990	
Country LEE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CASTAGNARO, THOMAS 5329 SUMMERLIN ROAD APT # 8 FORT MYERS, FL 33919				7. Name and Address of New Registered Agent Name JOYCE RUSSO Street Address (P.O. Box Number is Not Acceptable) 2040 SE 16TH ST City CAPE CORAL FL Zip Code 33990	
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>JOYCE RUSSO</i></u> <u><i>J Russo</i></u> <u><i>1/16/07</i></u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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	PRES CASTAGNARO, THOMAS <input checked="" type="checkbox"/> Delete 5329 SUMMERLIN ROAD, APT # 8 FORT MYERS, FL 33919		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition VP RUSSO, JOYCE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2040 SE 16TH ST CAPE CORAL, FL 33990	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RUSSO, JOYCE <input type="checkbox"/> Delete 5329 SUMMERLIN ROAD, APT # 8 FORT MYERS, FL 33919		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ST RUSSO, CHRIS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2040 SE 16TH ST CAPE CORAL, FL 33990	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RUSSO, CHRIS <input type="checkbox"/> Delete 48 OYSTER BAY LN FORT MYERS BEACH, FL 33931		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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>JOYCE RUSSO</i></u> <u><i>J Russo</i></u> <u><i>1/16/07</i></u> <u><i>585-259-8650</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					