2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000015464

Entity Name: ROCKLAN EARTH SERVICES, INC.

FILED Jun 23, 2005 Secretary of State

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

13794 NW 4 STREET, SUITE 202 SUNRISE, FL 33325

Current Mailing Address: New Mailing Address:

13794 NW 4 STREET, SUITE 202 SUNRISE, FL 33325

FEI Number: 65-0378451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOPEZ, SHARI LOPEZ, SHARI 7320 GRIFFIN ROAD, STE 104 13794 ŃW 4 STREET DAVIE, FL 33317 SUITE 202 SUNRISE, FL 33325 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: 06/23/2005

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

STULL, ROBERT JR STULL, ROBERT JR Name: Name: 13794 SW 4 STREET, SUITE 202 Address: 13794 SW 4 STREET, SUITE 202 Address:

City-St-Zip: SUNRISE, FL 33325 City-St-Zip: SUNRISE, FL 33325

Title: DV () Delete Title: DP (X) Change () Addition

LOPEZ, SHARI LOPEZ, SHARI Name: Name:

13794 SW 4 STREET, SUITE 202 Address: 13794 SW 4 STREET, SUITE 202 Address:

SUNRISE, FL 33325 SUNRISE, FL 33325 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARI LOPEZ DP 06/23/2005