

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morrhim
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 11 PM 8:18

DOCUMENT # P93000006885 (6)

1. Corporation Name

ROCKY FALLS, INC.

Principal Place of Business

**4922 VAN BUREN ST
HOLLYWOOD FL 33021**

Mailing Address

**4922 VAN BUREN ST
HOLLYWOOD FL 33021**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/25/1993

3a. Date of Last Report

04/13/1994

4. FEI Number

65-0388000

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 2531 Roosevelt St

2a. Mailing Address

26 2531 Roosevelt St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Hollywood FL

City & State

28 Hollywood FL

Zip

24 33020

Country

Zip

29 33020

Country

30

9. Name and Address of Current Registered Agent

**DUTTON, FRANK
4922 VAN BUREN ST
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 2531 Roosevelt St

84 City **Hollywood**

FL

85 Zip Code
33020

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **DUTTON, FRANK**
STREET ADDRESS **4922 VAN BUREN ST**
CITY - ST - ZIP **HOLLYWOOD FL 33021**

TITLE **D**
NAME **DUTTON, MONIQUE P**
STREET ADDRESS **4922 VAN BUREN ST**
CITY - ST - ZIP **HOLLYWOOD FL 33021**

TITLE **D**
NAME **FILION, AMBER**
STREET ADDRESS **2531 ROOSEVELD ST**
CITY - ST - ZIP **HOLLYWOOD FL 33020**

TITLE **D**
NAME **FILION, ROBERT**
STREET ADDRESS **2531 ROOSEVELD ST**
CITY - ST - ZIP **HOLLYWOOD FL 33020**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **2531 Roosevelt St**
1.4 CITY - ST - ZIP **Hollywood, FL 33020**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **2531 Roosevelt St**
2.4 CITY - ST - ZIP **Hollywood, FL 33020**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Frank E. Dutton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-95

Date

305-927-0315

Telephone Number