Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90002 030 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000025207

1. Corporation Name

ROCA GOLE VENTURE INC

DOOK G	OLI VERTONE, INO.										
Principal Place of Business . Mailing Address									B111 1881 1881		
FRANKEL, VICTOR FRANKEL, VICTOR											
4200 TRANQUILITY DR. 4200 TRANQUILITY DR.						BO MOTING IN THE	00040	_			
HIGHLAND BEACH FL 33487 HIGHLAND BEACH FL 33487			37			DO NOT WRITE IN THI	SSPAC				
US US						3. Date Incorporated or Qualifed					
			_			04/06/1993		1.0	-tind For		
	ncipal Place of Business 2a. Mailing Address					4. FEI Number	Applied For				
21						65-0403299	Not Applicable				
	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Add Fee Requ					
1	27										
City & State	ate City & State					6. Election Campaign Financing			\$5.00 May Be Added to Fees		
23		28			Trust Fund Contribution				Fees		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year to					
24	25	29	30			Personal Property Tax.	∐ Ye		□No		
	9. Name and Address of Curren	t Registered Agent		<u> </u>		10. Name and Address of New Registered	Agent				
				81	Name				1		
INGLIS, RICHARD K				82 Street Address (P.O. Box Number is Not Acceptable)							
2455 E SUNRISE BLVD											
SUITE 320				83					1		
FTL	AUDERDALE FL 33304			- 1			. 85	Zip C	ode.		
	•			84	City	F	ا"ا	Zip C	,000		
office or r agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered ager	tions of, Section 607.0505, Fig	nda Statt	nes.	•	on's board of directors. I hereby accept the app					
40		<u> </u>	13.	- Gen	t agriatoro raquiro	ADDITIONS/CHANGES TO OFFICERS	ND DIR	ECTO	RS IN 12		
12.			1.1 TII	n E		ADDITIONS/OFFAREES TO ST. HOLLIES		hange	Addition		
TITLE	D FOANIKE MOTOD		1.2 NAME					-			
NAME	FRANKEL, VICTOR		1.3 STREE						1		
STREET ADDRESS	440 O I EDEINE IIIV. NEUV		•						i		
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		1.4 CITY-5		r-zip			hange	Addition		
TITLE .	D	☐ DELETE	2.1 TITLE					ungo,			
NAME	SOLIS, FRANCISO A		2.2 NAME								
STREET ADDRESS	440 S FEDERAL HWY #201		2.3 STREE		ADDRESS						
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	<u> </u>	2.4 CITY-		T-ZIP	<u> </u>					
TITLE		· DELETE	3.1 TITLE				CI	nange	☐ Addition		
NAME			3.2 NA	WE	[Ĭ		
STREET ADDRESS			3.3 ST	REET	T ADDRESS						
CITY-ST-ZIP			3.4. C	TY-S	T-ZIP						
TITLE		☐ DELETE	4.1 TT	ΠE				hange	☐ Addition		
NAME			4.2 N	AME							
STREET ADDRESS			4.3 ST	REET	ADDRESS						
CITY-ST-ZIP			4.4 Cf		1						
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STREET ADDRESS			5.4 CI						ļ		
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CI 6.1 TI		1 - Alf		ПС	hange	Addition		
TITLE			6.2 N/				_,`				
NAME }									ŧ		
STREET ADDRESS			6.3 ST	REET	TADDRESS				ŀ		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP