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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000062721 (4)

ROSNET, INC.

FILED Jan 14 1997 8:00am Secretary of State



Principal Place										
i ilikupati tuk	of Business		Mailing Address 7351 TILLMAN DR LAKE WORTH FL 33467-7873			1 12011201 110 10100 11111				,, (19) (89)
7351 TILLMAN LAKE WORTH										
US	FL 33407	US US	. 00401-7070				ve			
						 Date Incorporated or 09/02/1993 	Qualified	1	of Last P 0/1996	leport
	ace of Business	2a. Mailing Add	ress			4. FEI Number			A	oplied For
21		26				59-3222425				ot Applicable
Suite, Apt.	#, etc	Suite Apt. #	, etc.			5. Certificate of Status I	Desired			Additional equired
City & State		Crty & State			·					······································
	i	├ ¬ ′				Election Campaign Fi Trust Fund Contributi	•	П		May Be to Fees
23 Zip	Country	28 Zip	T	Country		8. This corporation has				
24	25	29	30			Florida Statutes	III III III III III	Yes	ax briders No	. 199.032,
	9. Name and Address of Cur		100			10. Name and Address				
TING	SLEY, STEVEN R ESQ.			81	Name					
	5 EMMET ST.			-	0:	(0.0 D. 1)				
	SIMMEE FL 34741			82	Street Add	ress (P.O. Box Number is No	ot Acceptabl	e)		
VIO	SMMEE FL 34/41			83						
									,	
				84	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508. Flori	ida Statutes It	ne above	-named core	poration submits this stateme	ent for the p		changing i	ts registered
agent. La	m familiar with, and accept the of	oligations of, Section 607	'.0505, Florida	Statutes.						
SIGNATURE	Stranders have directed by many of towards (c)	Lacentanctic, it am Leable	tNOTE Boo	istered Aner	nt signature requi	ired when reinstatino)		DATE		
	Signature, typical or part lest name of reporters:	Lagent and the lift applicable AND DIRECTORS		istered Ager	nt signature requi	ired when reinstating) ADDITIONS/CHANGE	S TO OFFICE	DATE ERS AND	DIRECTOR	RS IN 12
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Ido hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(j), 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 of 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

AYWOND J DARBER SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICE

Barby 1/4

966 5443 Daytime Phone #