

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90034 037 ***163.75

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1. Entity Name

ROTSO, INC.



Principal Place of Business

1890 N. ATLANTIC AVE
A-407
COCOA BEACH FL 32931
US

Mailing Address

1890 N. ATLANTIC AVE
A-407
COCOA BEACH FL 32931
US



2. Principal Place of Business

190 SEMINOLE LN.
Suite, Apt. #, etc.
301

3. Mailing Address

190 SEMINOLE LN.
Suite, Apt. #, etc.
301

1st MOORE

CR2E034 (10/05)

City & State

COCOA BEACH, FL
Zip 32931 Country US

City & State

COCOA BEACH, FL
Zip 32931 Country US

4. FEI Number

65-0466587

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SOBRINO, JOSE A
1890 ATLANTIC AVE. A-407
COCOA BEACH FL 32931

7. Name and Address of New Registered Agent

Name

SOBRINO, JOSE A.

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

190 SEMINOLE LN.

APT. 301

City

COCOA BEACH, FL

Zip Code

32931

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/15/06

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PDST ☐ Delete
NAME SOBRINO, JOSE A
STREET ADDRESS 1890N. ATLANTIC AVE. A-407
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDST ☒ Change ☐ Addition
NAME SOBRINO, JOSE A.
STREET ADDRESS 190 SEMINOLE LN. #301
CITY-ST-ZIP COCOA BEACH, FL 32931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Jose A. Sobrino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(321) 543-1046