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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

**DIVISION OF CORPORATIONS** 

1996

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Zip

| DOCUMENT # PS 1. Corporation Name  ROSE'S RESCUE RANGE                  | 93000085052 (7)<br>Ers, Inc.                                 | 1 1881/1861 11/8 1800 11/1/ 1881// 88        |                                    |           |
|---|--|--|------------------------------------|-----------|
| Principal Place of Business 2373 S.E. 10TH COURT POMPANO BEACH FL 33062 | Mailing Address  2373 S.E. 10TH COURT POMPANO BEACH FL 33062 |  |                                    |           |
|   |  | 3. Date Incorporated or Qualified 12/14/1993 | 3a. Date of Last Report 04/28/1995 |           |
| 2. Principal Place of Business  | 2a. Mailing Address  | 4. FEI Number                                | Applie                             | ed For    |
| 21  | 26   | 65-0457996                                   | Not A                              | pplicable |
| Suite, Apt. #, etc.   | Suite, Apt. #, etc.  | 5. Certificate of Status Desired             | □ \$8.75 Add<br>Fee Requi          |           |
| City & State  | City & State   | 6 Election Campaign Financing                | ¢5.00                              |           |

City & State

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VAN DER VELDEN, ROSE 2373 S.E. 10TH COURT POMPANO BEACH FL 33062

9. Name and Address of Current Registered Agent

Country

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| untry | 8. This corporation has liability ter intangible tax under s 199.032, Florida Statutes Ves  No |
|-------|--|
|       | 10. Name and Address of New Registered Agent   |
| 81    | Name   |
| 82    | Street Address (P.O. Box Number is Not Acceptable)   |
| 83    |  |
| 84    | City 85 Zip Code   |

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be

Added to Fees

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

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| NAME   | DIRECTO    | ·          |  |
|--|------------|------------|--|
| 12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND TITLE  NAME  VAN DER VELDEN, ROSE  STREET ADDRESS  2373 S.E. 10TH COURT  POMPANO BEACH FL 33062  1.4 CITY-SI-ZIP  DELETE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-SI-ZIP   | DIRECTO    |            |  |
| TILE D DELETE 1.1 TITLE  NAME VAN DER VELDEN, ROSE  SIREET ADDRESS 2373 S.E. 10TH COURT  LIY-SI-ZIP POMPANO BEACH FL 33062  1.4 CITY-SI-ZIP  | DIFFIC     |            |  |
| NAME         VAN DER VELDEN, ROSE         1.2 NAME           STREET ADDRESS         2373 S.E. 10TH COURT         1.3 STREET ADDRESS           CITY-ST-ZIP         POMPANO BEACH FL 33062         1.4 CITY-ST-ZIP   | Change     | Addition   |  |
| STREET ADDRESS   2373 S.E. 10TH COURT   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   | _ onango   |            |  |
| CITY-ST-ZIP POMPANO BEACH FL 33062 1.4 CITY-ST-ZIP   |            |            |  |
| THE STATE OF THE S |            |            |  |
| TAILE D DELETE 2.1 TITLE   | Change     | Addition   |  |
| NAME VAN DER VELDEN, BILL 22NAME   | 1 outlings | ☐ voilion  |  |
| STREET ADDRESS 2373 S.E. 10TH COURT 23 STREET ADDRESS  |            |            |  |
| CITY-SI-ZIP POMPANO BEACH FL 33062   |            |            |  |
| The Property of the Property o | ] Change   | Addition   |  |
| NAME 3.2 NAME  | ) Outsings |            |  |
| STREET ADDRESS  3.3 STREET ADDRESS   |            |            |  |
| CITY-S1-ZIP 3.4 CITY-S1-ZIP  |            |            |  |
| 47-011 U-21  | 1 Change   | ☐ Addit    |  |
| NAME 4.2 NAME  | J 090      | □          |  |
| STREET ADDRESS 4.3 STREET ADDRESS  |            | •          |  |
| CITY-ST-ZIP 4.4 CITY-ST-ZIP  |            |            |  |
| TO CO.   | 1 Change   | Addition   |  |
| NAME 52 NAME   | jonango    |            |  |
| STREET ADDRESS 5.3 STREET ADDRESS  |            |            |  |
| CITY-ST-ZIP 5.4 CITY-ST-ZIP  |            |            |  |
| 3.7.0.1.0.1.1  | ) Change   | ☐ Addition |  |
| NAME 62 NAME   | 1 Surrigo  | Addition   |  |
| STREEL ADDRESS 6.3 STREET ADDRESS  |            |            |  |
| CITY-ST-ZIP 64 CITY-ST-ZIP   |            |            |  |

14. Ido 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 thanged, or on an attachment with an address.

SIGNATURE:

ICER OR DIRECTOR