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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000035689 (6)

ROCKGEN INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

FILED Mar 03 1997 8:00am Secretary of State



5811 MEMORIAL HWY SUITE 202 TAMPA FL 33615	PO BOX 260731 TAMPA FL 33685-0731						
				3. Date Incorporated or Qualified 05/09/1994	1	of Last F 1/1996	Report
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		·	oplied For
21 1198-62 mic Ave South	26 Cuito Ant H oto		*****************	59-3258825		+	ot Applicable
Surte, Apt. #, etc: 22	Suite, Apt. #, etc.	100	87	5. Certificate of Status Desired		4	Additional equired
City & State 23 ST PETERS BURG - FL-	City & State ST PETERS BUR		-FL-	Election Campaign Financing Trust Fund Contribution			May Be to Fees
7ip Country 24 33705 25	7in Country 29 33733-0087 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sum_{1} \) No			
9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered A	gent	
BUCHHEISTER, JEAN PIERRE			81 Name				
5811 MEMORIAL HWY SUITE 202			82 Street Add	dress (P.O. Box Number is Not Acceptable)			
TAMPA FL 33815		ļ	83				
			63				
			84 City		FL	85 Zip	Code
11 Pursuant to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the at	nove-named cor	poration submits this statement for the p	urbose of o	hanging i	ts registered
Pursuant to the provisions of Sections 607.0502 office or registered agent for both, in the State of agent. It im familiar with, and accept the obligat.	f Florida, Such change was au	thorized	by the corpora	tion's board of directors. I hereby accep	t the appo	intment as	registered
1 111 / 1 1400 4 0 4				Davel T	2/20	197	
SIGNATURE Signature of Longitude and the graduated agent	and the if applicable (NOTE:	Rogistered	I Agent signature requ	ired when reinstatings	2/20 SATE		
12. OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TELE D	D □ CELETE				Į.	Change	Addition
NAME BUCHHEISTER, JEAN PIERRE		1.2 NAME					
SIRIET ADDRESS 5811 MEMORIAL HWY SUITE 202		1.3 ST	REE1 ADDRESS				
City-ST-ZIP TAMPA FL 33615	DE LETE		TY - ST - ZIP			705	Nation 1
TIFLE	DELETE	2.1 (1)			Į.	Change	Addition
NAME		2.2 NA					
STELE* ACORESS			REET ADDRESS ITY - ST - ZIP				
CHT+S1-7P	DELETE					Change	Addition
NAME	E Prince	3.1 Tri 3.2 NA			•		
SHRELL ADORESS		•	REET ADDRESS				
City-St-AP			TY-ST-ZIP				
TILLE	DELETE				[Change	Addition
NAME		4. 2 N	AME				
STREET ADDRESS		4.3 ST	REET ADDRESS				
CH Y - ST - ZIF		4.4 C(TY-ST-ZIP				
10lt F	☐ DELETE	5.1 10	rlt			Change	Addition
NAME		5.2 NA	ME				
STREET ADORESS		5 3 ST	REEF ADDRESS				
CHY-51-20			TY-SY-ZIP				
TITLE	☐ DELETE	61 Ti	TLE		l	Change	Addition
NAME		62 NA	ME				
STREET ADDRESS		63 ST	REET ADDRESS				
01Y-S1-76 14. Lide hereby certify that the information supplied			IY-ST-ZIP				····

rise increases certainy trials are information adjusted with this lining does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of 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 other 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 fichanged, of on ab attachment with an address.

SIGNATURE:

THE CALMERT TO

JEAN PIEDER BUCHHESTER