1-24.97 B- 658 -C

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 # P94000040639 (4)

ROSEWOOD EQUITIES, INC.

140 ROYAL PALM WAY
SUITE 205
PALM BEACH FL 33480

Principal Place of Business

Mailing Address

140 ROYAL PALM WAY SUITE 205 PALM BEACH FL 33480-42

FILED Jan 24 1997 8:00am Secretary of State



PALM BEACH FL 33480						PALM BEACH FL 33480-4277						Date Incorporated or Qualified 05/25/1994		te of Last F	Report
2. Principal P	lace of Bus	iness			2a.	Mailing	Address					FEI Number			pplied For
21 231	1 71	GER	TAIL	COURT				RTAIL	1	OVRT	ļ	65-0502737			ot Applicable
Suite, Apt		27	Suite, Apt. #, etc.				0011	5.	Certificate of Status Desired		\$8.75	Additional equired			
City & Stat					11	City & State					6.	Election Campaign Financing			May Be
23 11	IAMI		FL.		28	M	IAM/		FL	-		Trust Fund Contribution			to Fees
Zip			untry		1	Zip	_	C	ountry	/	8.	This corporation has liability fo	rintangible	tax under s	s. 199.032,
24 3313	3	25	VIA		29	33	/33	30	LIS	4			Yes '		
	9. Name	and Ad	Idress of C	urrent	Regis	tered Ag	ent				10.	Name and Address of New R	egistered #	gent	
FCC	NOMIDES	. CHRIS	TOPHER						81	Name					
ECONOMIDES, CHRISTOPHER 2311 TIGERTAIL CT.									82	Ctroot Anid	(F	P.O. Box Number is Not Accepta	hla\		
	MI FL 331								02	Street Addi	ress (F	O. Box Number is Not Accepta	ibie)		
1990									83	ļ .			•		
									84	City				85 Zip	Code
									'	,,			FL		
office or r agent La SIGNATURE	registerect a imi familiar v Signature typo	with and	accept the	obligati	ons of	f, Section	607.0505, 1	Florida S	tatute	y the corporat S. ent signature requi	ired when	-	DATE		
12.			OFFICER	S AND	DIREC	CTORS		13	3.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	RS IN 12
TIFLE	PSTD						DELETE	1.1	TITLE					Change	Addition
NAME	ECONO	MIDES,	CHRISTO	PHER				1.2	NAME						
STREET ADDRESS	2311 TK	GERTAIL	CT.					1.3	STREET	ADDRESS					
C TY-ST-ZIP	MIAMI F	L 33134	,					1.4	CITY-S	ST - ZIP					
TITLE							DELETE		TITLE					Change	☐ Addition
NAME								2.3	2 NAME						
SIREET ADDRESS								2.3	STREET	ADDRESS					
CITY ST-ZIP		_						2	4 CITY -	ST-ZIP					
TIFLE	<u> </u>					[DELETE		TITLE					Change	Addition
NAME						_		1	2 NAME					-	,
STREET ADDRESS										T ADDRESS					
CITY - ST - ZIP									i. CITY-						
TITLE	 					I	DELETE		TITLE	0, En		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME						•		1	2 NAME]					_
STREET ADDRESS										r address					
								8		· .					
CITY-ST-Z-P Title	 		·			·· ·· · · · · · · · · · · · · · · · ·	DELETE		CITY-S	DI-ZIF				Change	Addition
NAME	`					L	DECEME	1	2 NAME	Ì				- Circugo	
										r apporce					
STREET ADDRESS										I ADDRESS					
CITY-SI-ZIF	ļ <u>-</u>					7	DELETE		CITY :	ST - ZIP				Change	Addition
TITLE	}					ι	DELETE	1	1 TITLE	}				L Change	□ Habition
NAME									2 NAME						
STREET ADDRESS								6.3	3 STREE	T ADDRESS					
CITY ST. 7IP	1							6.	4 CITY - 1	ST-ZIP					

I do 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 circulation or the corporation or the receiver or trusted 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:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICE

CHRISTOPHER ECONOMINES

1/15/87 (305) 8354725