

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000002472 1. Entity Name ROICO, INC.			
Principal Place of Business 21050 POINT PLACE, #2705 ATLANTIC III AT THE POINT AVENTURA, FL 33180		Mailing Address 21050 POINT PLACE, #2705 ATLANTIC III AT THE POINT AVENTURA, FL 33180	
			
		01142007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0552625	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
CORPCO, INC. 21050 POINT PLACE, #2705 ATLANTIC III AT THE POINT AVENTURA, FL 33180			
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 _____ (NOTE: Registered Agent signature required when restate) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS BITTAN, AVI 21050 POINT PLACE #2705 AVENTURA, FL 33180		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BITTAN, INBAL 21050 21050 POINT PLACE #2705 AVENTURA, FL 33180		
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TITLE 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 Chapter 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: 		1.15.2007 305 3104477	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	