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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000007572 (7)

DOCUMENT #
1. Corporation Name ROSE PETAL ENTERPRISES, INC.

Principal Place of Business Mailing Address



Suite, Apt. #, etc. 27 City & State City & State Zip Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8.75 Additional Fee Required Fee Required Status Desired Fee Required Fee Required Status Desired Fee Required Fee Required Fee Required Status Desired Fee Required F	378 DUBS (HOLLY HILL		378 DUBS DRIVE HOLLY HILL FL 321	378 DUBS DRIVE HOLLY HILL FL 32117					
2. Principal Place of Business 2. Making Address 3. Suite, Apt. #, etc. 5. Cofficials of Status Desired \$8.75 Additional Fea Regulated \$8.75 Additional F							3a. Date of Last Report		
Suite, April = sec. Suite, Additional of Fee Required of Suite, Additional of Suite, Addition							n/a-this is	first	
Suite, Apr. #, etc.	2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	Appli	ed For	
27	21		26	26			Not A	pplicable	
ALBANO, ROSE M 2429 N. ATLANTIC AVE. SUITE 39 DAYTONA BEACH FL 32118 11. Pursant to the provisions of Socious 607,0002 and 607 1508. Forids Statutes the above-named corporation submits this statement for the purpose of changing its registered difference of registered agent, or both, in the State of Florids 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 Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered openic, or both in the providers and a registered office or registered office or registered openic, or both in the providers and a registered office or registered office or registered openic, or both in the providers and a registered office or registered office o	Suite, Apt. #,	, etc.	· · ·			b. Certificate of Status Desired			
Zip	City & State			h		, , ,	- [-] 45.56 (1.2) 25		
9. Name and Address of Current Registered Agent ALBANO, ROSE M 2428 N. ATLANTIC AVE. SUITE 39 DAYTONA BEACH FL 32118 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered egent, or both, in this State of Rocket. Such change was authorized by the corporation's board of directors. I horiety accept the appointment as registered diffice or registered egent, or both, in this State of Rocket. Such change was authorized by the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the direction Such change was authorized by the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the direction State (as the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the direction State (as the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the direction State (as the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the direction of State (as the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the directors of the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the corporation's board of directors. I horiety accept the appointment as registered diffice or registered agent, and accept the displaced Agent and accept the d		Country	Zip	Country		8. This corporation has liability for in	ntangible tax under s 199	.032,	
ALBANO, ROSE M 2429 N. ATLANTIC AKE. SUITE 39 DAYTONA BEACH FL 32118 11. Pursuant to the provisions of Socions 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 submitched by the 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 submitched by the 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 submitched by the corporation's board of directors. I nonety accept the appointment as registered agent. I am familier with, and discope the designations of Socions Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. DAY STATE ALBANO, ROSE M 378 DUBS DRIVE 15. TITLE 1 ALBANO, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ALBANO, ADDITIONS AND ALBANO, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ALBANO, ADDITIONS/C	24	25 29 30		30					
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2429 N. ATLANTIC AVE. SUITE 39	·-···			81	Name				
SUITE 39 DAYTONA BEACH FL 32118 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Fiorida 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 above named corporation's board of directors. I horsely accept the appointment as registered agent, a manual registered agent, and accept the obligations of, Section 607 05005, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ALBANO, ROSE M 376 DUBS DRIVE 13 SIRRET ADDRESS OTIV-ST-ZP HOLLY HILL FL 32117 14 CITY-ST-ZP TITLE DELETE 1 TITLE DELETE 2 TITLE DELETE 3 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 5 TITLE DELETE 5 TITLE Change Addition Addition NAME 33 SIRRET ADDRESS OTIV-ST-ZP TITLE DELETE 5 TITLE DELETE 5 TITLE DELETE 5 TITLE Change Addition Addition THE ADDRESS STRET ADDRESS OTIV-ST-ZP TITLE DELETE 5 TITLE DELETE 5 TITLE DELETE 5 TITLE Change Addition Change Addition Addition THE ADDRESS STRET ADDRESS OTIV-ST-ZP TITLE DELETE 5 TITLE DELETE 5 TITLE DELETE 5 TITLE Change Addition Addition THE ADDRESS STRET ADDRESS THE ADDRES	·			82	82 Street Address (P.O. Box Number is Not Acceptable)				
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The Pursuant to the provisions of Socilions 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of clarged its registered differ or registered agent, or both, in the State of Florida Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered difference or registered dignet, and accept the culipations of Socion 607 0509, Florida Saluties SIGNATURE 12.				-	L Cau		as Zio Co	do	
or registered agent, or both, in the State of Florida. Such change was sulhorized by the corporation's board of directors. I horiety accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607, OSCOCO, Florida Statutes. SIGNATURE Signature. Speed or printed name of registered agent are of registered agent. Familiar with, and accept the obligations of, Section 607, OSCOCO, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITIE D	2			04	City		FL S Z C C	ue	
12 OFFICERS AND DIFECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS 1 1 1 1 1 1 1 1 1	or registere	id agent, or both, in the State of Flo	orida. Such change was authoriz	ed by the cor	named corpor poration's boa	ration submits this statement for the pur rd of directors. I hereby accept the appo	piose of changing its regist bintment as registered age	ered office nt. I am	
12. OFFICERS AND DIRECTORS TITLE D DELETE 1.1 TITLE ALBANO, ROSE M SIRET ADDRESS 378 DUBS DRIVE HOLLY HILL FL 32117 TITLE D ALBANO, JODI L 378 DUBS DRIVE HOLLY HILL FL 32117 TITLE D ALBANO, JODI L 378 DUBS DRIVE HOLLY HILL FL 32117 TITLE D ALBANO, JODI L 378 DUBS DRIVE JORGESS CITY-S1-7/P HOLLY HILL FL 32117 TITLE D DELETE 3.1 TITLE 3.3 SIRET ADDRESS CITY-S1-7/P HOLLY HILL FL 32117 TITLE DELETE 3.1 TITLE 3.2 NAME 3.3 SIRET ADDRESS CITY-S1-7/P TITLE ALBANO, JODI L 3.4 Addition AMAE SIRET ADDRESS CITY-S1-7/P TITLE ADDRESS CITY-S1-7/P DELETE 4.1 TITLE ADDRESS CITY-S1-7/P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TO Change Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS ADDITION ADDITIONS/CHANGES TO OFFICERS ADDITIONS ADDITIONS/CHANGES TO OFFICERS ADDITIONS ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICE TO OFFICE	SIGNATURE _	Signature typed or printed name of registered age	ent and title I applicable (NC	OTE: Registered Ag	ant signature require	ki when reinstating)	DATE		
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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 cath; 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 changed, or on an attachment with an address.

LILL M. ALLAND ROSE M. Albano

4/19/96 904-672-2200