2007 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P95000011988** ROSNICK ENTERPRISES, INC. Principal Place of Business Mailing Address 3001 NW 17 AVE 3001 NW 17 AVE MIAM!, FL 33142 MIAMI, FL 33142

FILED Apr 30, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CR2E034 (11/05) 04252007 No Chg-P Applied For 4. FEI Number 65-0564138 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

BARRIOS, JOSE A 3001 NW 17TH AVENUE MIAMI, FL 33142

DO NOT WRITE IN THIS SPACE

| 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 Synature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent | | | Agent signature required when reinstating) | DATE |
| FIL After Ma | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Financ Trust Fund Contribution. | \$5.00 May Be Added to Fees | · |
| 10. | OFFICERS AND DIREC | TORS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP BARRIOS, JOSE A JR. 3001 NW 17 AVE MIAMI, FL 33142 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT PEREZ, BARBARA 3001 NW 17 AVE MIAMI, FL 33142 | | | U00000747304 05/17/07-80021-003 158.75 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DSV BARRIOS, JOSE 3001 NW 17 AVE MIAMI, FL 33142 | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | IN . | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| 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: <

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-389.7029