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

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000041677 (2)

ROCKY INVESTMENTS OF FLORIDA INC.

FILED May 04 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 7449 COLLINS AVE. 7449 COLLINS AVE. MIAMI FL 33141 MIAMI FL 33141 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/26/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0590293 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 EL SAHN, MOHAMED 7449 COLLINS AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33141 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 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 authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title diapplicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TITLE MALE **ELSAHN, MOHAMMED** CR2E034 1.2 NAME 1555 NE 121 ST. STREET ADDRESS 1.3 STREET ADDRESS NO. MIAMI FL 33161 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2 1 1(T) F ARD EL NOUR, MERVAT M 22 NAME STREET ADDRESS 15855 MIAMI LAKE WAY #352 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE Change ___ Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 41 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIP

11. Thereby 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 director of the corporation of 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 characteristic made under oath, that I am an officer or director of the corporation with an address.

SIGNATURE:

 $_{h}^{2}$

*