

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000077735

1. Corporation Name
ROSARIO ENTERPRISES, INC.

Principal Place of Business
1929 WEST 60TH ST.
HIALEAH FL 33012

Mailing Address
1929 WEST 60TH ST.
HIALEAH FL 33012

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90040 003 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1995

4. FEI Number

65-0612371

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

GUERRERO, JOSE A
1929 WEST 60TH ST.
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name HERMINIA ROSARIO

82 Street Address (P.O. Box Number is Not Acceptable)
4410 W 16 AV. STE. # 2

83

84 City HIALEAH, FL. FL 85 Zip Code 33012

11. Pursuant to the provisions of Sections 607.0592 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME GUERRERO, JOSE A
STREET ADDRESS 7848 N.W. 192ND ST.
CITY-ST-ZIP MIAMI FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME JOSE GUERRERO
1.3 STREET ADDRESS 925 BRIAR RIDGE RD
1.4 CITY-ST-ZIP WESTON, FL. 33327

2.1 TITLE D
2.2 NAME JOSE ROSARIO
2.3 STREET ADDRESS 925 BRIAR RIDGE RD
2.4 CITY-ST-ZIP WESTON, FL. 33327

3.1 TITLE D
3.2 NAME HERMINIA ROSARIO
3.3 STREET ADDRESS 925 BRIAR RIDGE RD
3.4 CITY-ST-ZIP WESTON, FL. 33327

4.1 TITLE D
4.2 NAME GISSELLE ROSARIO
4.3 STREET ADDRESS 925 BRIAR RIDGE RD
4.4 CITY-ST-ZIP WESTON, FL. 33327

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)