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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000040765 (5)

ROLFE ENTERPRISES, INC.

Principal Place of Business Mailing Address

332 W. BOYNTON BEACH BLVD. STE 4
BOYNTON BEACH FL 33435

BOYNTON BEACH FL 33435-4065

FILED May 16 1997 8:00am Secretary of State



BOYNTON BEACH FL 33435		BOYNTON BEACH FL 33435-4065							
					3. Date incorporated or Qual 05/06/1996	ified	3a. Da	te of Last	. Report
	lace of Business	2a, Mailing Address			4. FEI Number				Applied For
	Bentwater Circle	26 835 Bentwa	ter	Circl	e 65-0664962				Not Applicable
Suite, Apt.	#201	Suite, Apt. #, etc. 27 #201			5. Certificate of Status Desire	ed [\$8.75 Additional Fee Required		
City & State 23 Naples		City & State 28 Naples, FL			6. Election Campaign Finance Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24 3 4 1 0 8	Country 25		Oour 10	ntry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	g, Name and Address of Current	t Registered Agent			10. Name and Address of Ne	w Regis	stered /	Agent	
)WN, LINDA		1	81 Name	Anthony, Mark				
332 W. BOYNTON BEACH BLVD. STE 4			82 Street Add		Address (P.O. Box Number is Not Acc	eptable)		· · · · · · · · · · · · · · · · · · ·
BOY	'NTON BEACH FL 33435		_	1			, 		
				83 D 3 E	Bentwater Circle	. 4	201		
	e e		-	B4 City	Bentwater CITCLE	<u> </u>		85 7	p Code
					Naples		FL	34	4108
11. Pursuant t office or re agent. Lar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obliga	⁹ and 607.1508, Florida Statutes of Florida. Such change was au tions of, Section 607.0505, Flori	s, the ab thorized da Statu	ove-named by the corp ites.	corporation submits this statement for poration's board of directors. I hereby	the pur accept t	pose of the app	changing pintment	its registered as registered
SIGNATURE	Signature, typed or printed name of registered agen	MIS			required when reinstating)		0/9 DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICE	RS AND	DIRECTO	ORS IN 12
TITLE	D	☐ DELETE	1.1 1(1)	.F				Change	e Addition
NAME	POPE, DOMINICK		1.2 NA	ИE					
STREET ADDRESS	225 PARK AVENUE STE 211		1.3 STR	EET ADDRESS					
CITY-ST-ZIP	NEW YORK NY 10169		1.4 CIT	Y - S1 - ZIP					
TITLE	D	☐ DELETE	2.1 1111	.E				Change	e 🔲 Addition
NAME	PIOPPI, FRANK		2.2 NA	ME					
STREET ADDRESS	225 PARK AVENUE STE 211		2.3 STH	EE1 ADDRESS					
CITY-ST-ZIP	NEW YORK NY 10169		2. # CIT	Y - S1 - ZIP					
TITLE		☐ DELETE	3.1 7111	.F				☐ Change	a 🔲 Addition
NAME			3.2 NAM	ΑE					
STREET ADDRESS			3.3 STR	EET ADDRESS					
CITY-ST-ZIP	<u> </u>		3.4. CIT	Y-S1-71P					
TITLE		[_] DELETE	4.1 TITL	.E				Change	e 🔲 Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP				_	
TITLE		☐ DELETE	51111	.E				☐ Change	e 🔲 Addition
NAME			5.2 NAM	AE.					
STREET ADDRESS			5 3 STR	EET ADDRESS					
CITY-ST-ZIP				Y-\$1-ZIP					
TITLE		☐ DELETE	6.1 1170	E				☐ Change	e Addition
NAME			6 2 NAN	AE					
STREET ADDRESS			6.3 STR	EE1 ADDRESS					
CITY-ST-ZIP			6.4 CIT	(-S1-ZIP					

14. I do 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 cortify 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 it made under oath; that I am an officer or director of the corporation or the receiver or trusted 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.

DNATURE 4/30/07 212-200-270