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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000
1. Corporation Name
ROSEMARK INTERNATIONAL, INC. P9700009007 (0)

## **FILED** Mar 31 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					•	3 sentistet uim jatit (anti: antis			
•				N DDIVE	NOIVE				
1702 S.E. VILLAGE GREEN DRIVE 1702 S.E. VILLAGE GREEN PORT ST LUCIE FL 34952 PORT ST LUCIE FL 34952									
FORT ST COOK	FL 34802	roni si ce	JOIL 1 E 0700	ie.			DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified	<del></del>	
			· · · • • • • • • • • • • • • • • • • •				01/24/1997		
2. Principal Plac	e of Business	2a. Mailing A	ddress					ied For	
21		26						Applicable	
Suite, Apt. #,	etc.	Suite, Ap	t. #, etc.				5. Certificate of Status Desired S8.75 Add	litional	
22		27					Fee Requ	ired	
City & State		City & Sta	ate				6. Election Campaign Financing \$5.00 M	av Be	
23		28	28				Trust Fund Contribution		
Zip	Country	Zip			ountry		8. This corporation owes or has paid the current year Intang	gible	
24	25	29		30			Personal Property Tax due June 30.  Yes 1		
	9. Name and Address of Cur		nt	1001			10. Name and Address of New Registered Agent		
ZANE	, JEFFREY P ESQ		· · · · · · · · ·		81	Name		$\neg \neg$	
701 NORTHPORT PARKWAY				[4	82 Street Address (P.O. Box Number is Not Acceptable)				
SUITI				L.					
W PA	LM BEACH FL 33407			}'	83				
				- h	64	City	85 Zip Co	<del></del>	
				- ''	D4	City	FL 85 Zip Co	.10	
11. Pursuant to	the provisions of Sections 607.0	0502 and 607.1508. F	lorida Statut	es, the ab	ove-	named corr	poration submits this statement for the purpose of changing its re	egistered	
office or rea	istered agent or both in the St	ate of Florida. Such c	hange was a	authorized	by 1	the corporat	ition's board of directors. I hereby accept the appointment as re-	gistered	
agent. I am	familiar with, and accept the ob	iligations of, Section €	607.0505, FIG	orida Statu	ites.				
SIGNATURE									
	mature, typed or printed name of registered		TON)		Ageni	l signalure requi	ired when reinslating) DATE		
12.		AND DIRECTORS	DE: 555	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	PD	L	] DELE <b>te</b>	1.1 TiTL	.E		☐ Change [	] Addition	
NAME	BROWN, JAMES A			1.2 NAA	AE.				
STREET ADDRESS	2623 BRONCO YTRAIL			1.3 STR	EET A	DORESS			
CITY-ST-ZIP	DULUTH GA 30136			1.4 C(T)	Y - ST-	. 7IP			
TITLE	VD		DELETE	2.1 TITL			☐ Change	Addition	
NAME	AMBROGI, RICHARD	_	=	2.2 NAN			- · ·	_	
	1702 SE VILLAGE GREEN	ND						!	
STREET ADDRESS	PORT ST LUCIE FL 34952	Dn				.DDRESS			
City-St-ZiP			1	2. 4 CIT		- ŽIP			
TITLE	डा	L	DELETE	3.1 TITE	.E	-	Change [	Addition	
NAME	BROWN, MARGARET R			3.2 NAN	ΝE				
STREET ADDRESS	2623 BRONCO TRAIL			3.3 STR	EET A	.DDRESS			
CITY-ST-ZIP	DULUTH GA 30136			3.4. CIT	Y-ST	- ZIP			
TITLE	<del></del>	Т	DELETE	4.1 TITU		-=	Change	Addition	
NAME		_		4, 2 NA					
i						DOULOS			
STREET ADDRESS						DORESS			
CITY-ST-ZIP		<del>_</del>	1	4.4 CIT		- ZIP	F1 ~.	<del></del>	
TITLE		L	DELETE	5.1 TITL	.E		☐ Change	Addition	
NAME				5.2 NAN	ΛE				
STREET ADDRESS				5.3 STR	EET A	DDRESS			
CITY-ST-ZIP				5.4 CITY		1			
TITLE		т	DELETE	6.1 TITL			☐ Change	Addition	
	_	$\frown$		E .		1			
NAME			4	6.2 NAN					
STREET ADORESS	/ /		//	6.3 STR	EET A	DDRESS			
CITY-ST-ZIP	//		/	6.4 CITY					
14. I hereby cer	tify that the information supplied	d with this ling loes	por audify fo	or the exer	nptic	on stated in	Section 119.07(3)(i), Florida Statutes, I further certify that the int	ormation	

indicated on this annual re officer or director of the co Block 12 or Block 13 if ch o and accurate and that my signature shall have the same legal effect as if made under oath; that I am a swered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in