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Sep 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1998

FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97 000016681  
1. Corporation Name:

ROCK DELIVERY, INC.

Principal Place of Business:

Mailing Address:

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  |                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|--|-------------------------------------------------------|--|
| 2. Principal Place of Business:                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 2a. Mailing Address:   |  | 3. Date Incorporated or Qualified                     |  |
| 21 Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 26 11407 N.W. 7 STREET |  | 02-18/97                                              |  |
| 22 City & State:                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 27 SUITE 201           |  | 4. FEI Number                                         |  |
| 23 Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 28 MIAMI, FLORIDA      |  | 65-0733113                                            |  |
| 24 Country:                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | 29 33172               |  | 30 Country:                                           |  |
| 9. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  | 10. Name and Address of New Registered Agent          |  |
| Juan Carlos Hernandez<br>11407 NW 7 ST. Ste. 201<br>MIAMI, FL 33172                                                                                                                                                                                                                                                                                                                                                                                             |  |                        |  | 81 Name                                               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  | 82 Street Address (P.O. Box Number is Not Acceptable) |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  | 83                                                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  | 84 City                                               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  | 85 Zip Code                                           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |  | FL                                                    |  |
| 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. |  |                        |  |                                                       |  |

|                            |  |                                                       |  |
|----------------------------|--|-------------------------------------------------------|--|
| 12. OFFICERS AND DIRECTORS |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
| 1. TITLE                   |  | 1.1 TITLE                                             |  |
| NAME                       |  | 1.2 NAME                                              |  |
| STREET ADDRESS             |  | 1.3 STREET ADDRESS                                    |  |
| CITY-STATE-ZIP             |  | 1.4 CITY-STATE-ZIP                                    |  |
| 2. TITLE                   |  | 2.1 TITLE                                             |  |
| NAME                       |  | 2.2 NAME                                              |  |
| STREET ADDRESS             |  | 2.3 STREET ADDRESS                                    |  |
| CITY-STATE-ZIP             |  | 2.4 CITY-STATE-ZIP                                    |  |
| 3. TITLE                   |  | 3.1 TITLE                                             |  |
| NAME                       |  | 3.2 NAME                                              |  |
| STREET ADDRESS             |  | 3.3 STREET ADDRESS                                    |  |
| CITY-STATE-ZIP             |  | 3.4 CITY-STATE-ZIP                                    |  |
| 4. TITLE                   |  | 4.1 TITLE                                             |  |
| NAME                       |  | 4.2 NAME                                              |  |
| STREET ADDRESS             |  | 4.3 STREET ADDRESS                                    |  |
| CITY-STATE-ZIP             |  | 4.4 CITY-STATE-ZIP                                    |  |
| 5. TITLE                   |  | 5.1 TITLE                                             |  |
| NAME                       |  | 5.2 NAME                                              |  |
| STREET ADDRESS             |  | 5.3 STREET ADDRESS                                    |  |
| CITY-STATE-ZIP             |  | 5.4 CITY-STATE-ZIP                                    |  |
| 6. TITLE                   |  | 6.1 TITLE                                             |  |
| NAME                       |  | 6.2 NAME                                              |  |
| STREET ADDRESS             |  | 6.3 STREET ADDRESS                                    |  |
| CITY-STATE-ZIP             |  | 6.4 CITY-STATE-ZIP                                    |  |

SIGNATURE: \_\_\_\_\_

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.

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-09/18/98--01019--019  
\*\*\*150.00

SIGNATURE: Juan Carlos Hernandez

CR2E034 (10/97)