

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**FILED**  
**Jul 15, 1999 8:00 am**  
**Secretary of State**

07-15-1999 90008 008 \*\*\*158.75

DOCUMENT # **P97000048280**

1. Corporation Name

**ROCKING H PRODUCTIONS, INC.**



Principal Place of Business

**720 LITHIA PINECREST RD  
BRANDON FL 33511  
US**

Mailing Address

**720 LITHIA PINECREST RD  
BRANDON FL 33511  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/01/1997**

4. FEI Number

**59-3448917**

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. ☐ Yes ☒ No

2. Principal Place of Business

**21 2001 TIMBERFALL LANE**

Suite, Apt. #, etc.

**22**

City & State

**23 VALERICO, FLORIDA**

Zip

**24 33594**

Country

**25 ~~MEXICO~~ U.S.A.**

2a. Mailing Address

**26 Same as 21**

Suite, Apt. #, etc.

**27**

City & State

**28**

Zip

**29**

Country

**30**

9. Name and Address of Current Registered Agent

**HOLCOMBE, CYNTHIA  
720 LITHIA PINECREST ROAD  
BRANDON FL 33511**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**2001 TIMBERFALL LANE**

83

84 City **VALERICO**

**FL**

85 Zip Code

**33594**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**NAME  
HOLCOMBE, CYNTHIA L  
STREET ADDRESS  
720 LITHIA PINECREST ROAD  
CITY-ST-ZIP  
BRANDON FL 33511**

TITLE ☐ DELETE

**NAME  
HOLCOMBE, JAMES B  
STREET ADDRESS  
720 LITHIA PINECREST ROAD  
CITY-ST-ZIP  
BRANDON FL 33511**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

☒ Change ☐ Addition

**2001 TIMBERFALL LANE  
VALERICO, FL. 33594**

☒ Change ☐ Addition

**2001 TIMBERFALL LANE  
VALERICO, FL. 33594**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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.

SIGNATURE:

**Cynthia J. Holcombe** **CYNTHIA HOLCOMBE** **07/07/99** **643-4748**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

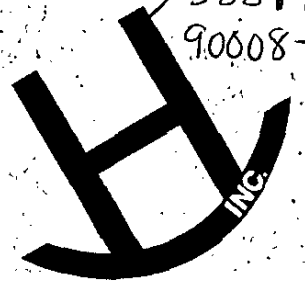
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Rocking H

◆ Productions



TO: Florida Department of State  
FROM: Cynthia Holcombe *(CH)*  
DATE: July 7, 1999  
RE: 1999 Profit Corporation Annual Report

In my mail today was the annual report "2nd-Notice" form to be completed and returned. I have filled in all the new information and am sending it back to you.

I called the toll-free number to inform you that I never received the first form and my instructions from someone in your office were to send a copy of my memo that I had sent to you to change my address and to ask that the \$400 late fee be waived. Had I received the report earlier this year, I would have sent it back immediately. Its not worth NOT sending it in only to be hit with a \$400 late fee! ;-)!

Since this only my second year as a Florida corporation (or any corporation for that matter!), I am not in the habit of everything I am supposed to do or I would have realized earlier that I had not received the report. So, included with my report is a check in the amount of \$158.75, which includes \$61.25 annual report fee + \$88.75 Corporation supplement fee + \$8.75 for certificate of status.

If you have any questions, please contact Cynthia at (813) 643-4748. Thanks!