

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90312 039 \*\*\*150.00

DOCUMENT # P97000080474

1. Entity Name  
ROCKERS ISLAND ENTERTAINMENT, INC.



Principal Place of Business

20401 NW 2ND AVE  
SUITE 300  
MIAMI, FL 33169

Mailing Address

20401 NW 2ND AVE  
SUITE 300  
MIAMI, FL 33169

60024998



02272006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

601 NE 36 St

Suite, Apt. #, etc.

2012

City & State

Miami, FL

Zip

33137

Country

USA

3. Mailing Address

601 NE 36 St

Suite, Apt. #, etc.

2012

City & State

Miami, FL

Zip

33137

Country

USA

4. FEI Number  
65-0787510

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOUISIAS, JOSEPH  
20401 NW 2ND AVE  
SUITE 300  
MIAMI, FL 33169

7. Name and Address of New Registered Agent

Name Louisias, Jr., Joseph

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

601 NE 36 St

2012

City

Miami

FL

Zip Code

33137

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

Joseph Louisias, Jr. Pres

4-4-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD  
NAME LOUISIAS, JOSEPH JR.  
STREET ADDRESS 20401 NW 2ND AVE SUITE 300  
CITY-ST-ZIP MIAMI, FL 33169 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD  
NAME Louisias, Jr., Joseph ☒ Change ☐ Addition  
STREET ADDRESS 601 NE 36 St, H 2012  
CITY-ST-ZIP Miami, FL 33137

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Louisias, Jr. Pres.

Date

Daytime Phone #

4/4/06 684-5639