2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000086115

1. Entity Name

ROCKING WATERFALLS, INC.



FILED Feb 05, 2007 08:00 AM Secretary of State

Principal Place of Business

6221 PEMBROKE ROAD HOLLYWOOD, FL 33023 Mailing Address

6221 PEMBROKE ROAD HOLLYWOOD, FL 33023



DO NOT WRITE IN THIS SPACE

01112007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0786994 Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BELLET, CAROL 6221 PEMBROKE ROAD HOLLYWOOD, FL 33023 DO NOT WRITE
IN THIS SPACE

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, 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, 2007 Fee will be \$550.00

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

_____U00000622249 |2/13/07-80017-024 | 150.00

10. OFFICERS AND DIRECTORS TITLE NAME BELLET, DANIEL 6221 PEMBROKE ROAD STREET ADDRESS HOLLYWOOD, FL 33023 CITY-ST-ZIP BELLET, CAROL NAME STREET ADDRESS 6221 PEMBROKE ROAD CITY-ST-ZIP HOLLYWOOD, FL 33023 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. Thereby 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 AND TYPED OR PRINTED NAME OF STORMED OFFICER ON DIRECTOR

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