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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000031653 1. Corporation Name, ROSENTHAL ENTERPRISES INC.

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90075 006 ***150.00

Principal Place of Business 620 CRESCENTOR, P.O., BOX 1268/ 11AKE PARK FL, 33403 1AKE PARK FL				DO NOT WRITE IN THIS SPACE				
MAE/MAK 12, 301	////	334	403	3. Date incorporated or Qualifed			}	
2. Principal Place of Business	2a. Mailing Address	<u> </u>		Applied For Not Applicate Not			`	
21 Suite, Apt. #, etc.	Suite, Apt. #, etc.		000000		\$8.75 A			
22 Suite, Apr. #, etc.	27	_		5. Certificate of Status Desired		Fee Rec		
City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country		Country	<u> </u>	This corporation owes the current year Intangible				==
24 25	<u> </u>	,		Personal Property Tax.	_		EN ₀	
9. Name and Address of Curre		701		10. Name and Address of New Regis	tered Ag	ent		
51110 DE E K11/10	ρ _Δ .	81	Name					
001 1/ DIXID HOUR			Street Addre	ess (P.O. Box Number is Not Acceptable)				
1 ALP, WORTH F1/33460								
LAKE WORTH FL!	33700							
		84	City		FL	85 Zip C	ode	
11. Pursuant to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the abov	e-named corpo	ration submits this statement for the purp	ose of ch	anging its	registered	
office or registered agent, or both, in the State agent. I am familiar with, and accept the obligi	of Florida. Such change was aut ations of, Section 607.0505, Florid	thorized by da Statutes	the corporation.	n's board of directors, I hereby accept the	appointn	ient as reg	jistered	
SIGNATURE				united and extension and exten	ATE			_
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICE		DIRECTO!	RS IN 12	, ao
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NAME	321				 -		 -	
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NAME	6.2							
STREET ADDRESS	NCOO .		TADDRESS					
CITY-ST-ZIP 14. I hereby certify that the information supplied w	ish ship filip at a set accept a set	6.4 CITY-S	1	notion 440 07/2\/i) Elecido Statutos I find	har cortif	that the i-	nformation	}
 i nereby certify that the information supplied w 	nur uns ming opes not quality for t	me exempt	ion stated in Se	ection metoriojn, rionga ajatutes, i iun	nor ceruly	uracure II	HOTTING GOTT	

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, with all other like empowered.

SIGNATURE: