

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036728

Entity Name: ROSE KNOWS, INC.

FILED
Mar 15, 2007
Secretary of State

Current Principal Place of Business:

7022 FOUR SEASONS CIRCLE
BRADENTON, FL 34202

New Principal Place of Business:

5698 SANDSTONE WAY
JACKSONVILLE, FL 32258

Current Mailing Address:

7022 FOUR SEASONS CIRCLE
BRADENTON, FL 34202

New Mailing Address:

13820 ST. AUGUSTINE RD.
113-295
JACKSONVILLE, FL 32258

FEI Number: 59-3508365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, ROBERT C P
7022 FOUR SEASONS CIRCLE
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

ROSE, ROBERT C P
5698 SANDSTONE WAY
JACKSONVILLE, FL 32258 US

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.

SIGNATURE: ROBERT ROSE

03/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSE, ROBERT C P
Address: 7022 FOUR SEASONS CIRCLE
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSE, ROBERT C P
Address: 5698 SANDSTONE WAY
City-St-Zip: JACKSONVILLE, FL 32258

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT ROSE

P

03/15/2007

Electronic Signature of Signing Officer or Director

Date