2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000044365

Entity Name: ROSELLO AMERICA, INC.

FILED Jun 30, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Business.	New Fillicipal Flace of Busiliess.

300 COLORADO AVE. 3519 SW SUNSET TRACE CIRCLE

SUITE 202 PALM CITY, FL 34990 STUART, FL 34994

Current Mailing Address: New Mailing Address:

300 COLORADO AVE. 3519 SW SUNSET TRACE CIRCLE

SUITE 202 PALM CITY, FL 34990 STUART, FL 34994

FEI Number: 65-0837311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS ENTERPRISES INC. 941 4TH ST #200 MIAMI, FL 33139 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD () Delete Title: CPD (X) Change () Addition

 Name:
 ROSELLO, FLOREAL
 Name:
 ROSELLO, FLOREAL

 Address:
 300 COLORADO AVENUE
 Address:
 3519 SW SUNSET TRACE CIRCLE

City-St-Zip: STUART, FL 34994 City-St-Zip: PALM CITY, FL 34990

Title: ST () Delete Title: () Change () Addition

 Name:
 CANNEYT, SOPHIE
 Name:

 Address:
 3519 SW SUNSET TR CIR
 Address:

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SOPHIE CANNEYT SECR 06/30/2005