

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

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90001 044 ***150.00

DOCUMENT # P98000059707

1. Corporation Name
ROSE TRAVEL, INC.

Principal Place of Business

788 SOUTH FEDERAL HIGHWAY
DEERFIELD BEACH FL 33441

Mailing Address

788 SOUTH FEDERAL HIGHWAY
DEERFIELD BEACH FL 33441

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/07/1998

4. FEI Number

65-0847456

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 821 SE 9th ST

2a. Mailing Address

26 821 SE 9th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 DEERFIELD BCH FL

City & State

28 DEERFIELD BCH FL

Zip

24 33441

Country

25 USA

Zip

29 33441

Country

30 USA

9. Name and Address of Current Registered Agent

RIGGENBACH, ROSEANE
711 TIVOLI CIRCLE #101
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name

DAVID R ROY, P.A.

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

83

4209 N. FEDERAL HWY.

84 City

DOMINICAN BEACH

FL

85 Zip Code

33064

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-10-99

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME RIGGENBACH, ROSEANE
STREET ADDRESS 711 TIVOLI CIRCLE #101
CITY-ST-ZIP DEERFIELD BEACH FL 33441

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME RIGGENBACH, ROSEANE

1.3 STREET ADDRESS 5951 WESLEY PARK #107

1.4 CITY-ST-ZIP BOCA RATON, FL 33433

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0345798