

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000063205

1. Entity Name
ROCHGATE, INC.



Principal Place of Business
2875 N.E. 191ST STREET
SUITE 404
AVENTURA, FL 33180

Mailing Address
2875 N.E. 191ST STREET
SUITE 404
AVENTURA, FL 33180

FILED
Mar 22, 2006 08:00 AM
Secretary of State



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0854107

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REINHARD, SANFORD N
2875 N.E. 191ST STREET
SUITE 404
AVENTURA, FL 33180

**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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE PS
NAME GOLDLIST, FAY
STREET ADDRESS 12 GOLDFINCH CRT
CITY-ST-ZIP WILLOWDALE ONTARIO, m2r2c4

TITLE VPT
NAME FRYDRYCH, ROCHELLE
STREET ADDRESS 12 GOLDFINCH CRT
CITY-ST-ZIP WILLOWDALE ONTARIO, m2r2c4

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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04/06/06-80027-011 150.00

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IN THIS SPACE**

12. I hereby 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: RFrydrych
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 1/06 905-8862176
Date Daytime Phone #