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 Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90097 006 ***150.00

DOCUMENT #	P98000075939
Corporation Name	

ROSE H	ILL VENTURE CORP.				1						
Principal Place	e of Business	Mailing Address				11301100	100 16301 16111 00111 AD)		(511) 1 0 (1) (20)	
735 NORTH THORNTON AVENUE 735 NORTH THORNTON AVENUE ORLANDO FL 32803 ORLANDO FL 32803						DO NOT WRI	TE IN THIS	SPACE			
						2 Date Incorp	orated or Qualifed	12 114 11110			
					l	08/31/199	_			{	
Principal Place of Business 2a. Mailing Address						4. FEI Number	Г		Apr	olied For	
21 26						59-3536164				Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					· · · · · ·	E Cortifeate of	Status Desired		\$8.75 A		
22	27					5. Certificate of		<u> </u>	Fee Rec	quired	
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be					
23		28				Trust Fund	Contribution		Added to	Fees	
Zip	Country					This corporation owes the current year Intar Personal Property Tax.				□No	
24	25 9. Name and Address of Curre	nt Registered Agent	30			10. Name and Address of New Registered Agent					
	5. Name and Address of Come	itt ttegisterea rigent	8	11 N	Name	, , ,					
	MONT, SUNIA		3	12 5	Street Addres	ss /P O Box Nur	ber is Not Accepta	able)		-	
735 NORTH THORNTON AVENUE				30 000 7 007 00	ess (P.O. Box Number is Not Acceptable)						
OHL	ANDO FL 32803		8	13			• • •				
			8	4 (City			FL	85 " Zip C	ode	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered eg	e of Florida. Such change was ations of, Section 607.0505, F	authorized t lorida Statut	es.	arned corpor a corporation	s board of direct	s statement for the ors. I hereby acce	purpose of ot the appoint	changing its ntment as reg	registered gistered	
12.		ND DIRECTORS	13.	90			CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12	
TITLE		☐ DELETÉ	1.1 TITL		P/I				Change	Addition	
NAME			1.2 NAM			Sunia Piermont				ļ	
STREET ADDRESS		. 138			DRESS 735	35 North Thornton Avenue					
CITY-ST-ZIP			14 CITY	-\$1-ZI	P Or1	Lando, F	lorida 3	2803			
TITLE		☐ DELETE	2.1 TITL	=	V/T	V/T/D			☐ Change	★ Addition	
NAME			2.2 NAM	Ε	Mar	ario Prieto					
STREET ADDRESS		238		EET AD	DRESS 735	North	Thornton	nton Avenue			
CITY-ST-ZIP			2. 4 CIT	/-ST-Z	ZIP Orl	ando, F	<u>lorida 3</u>	<u> 2803 </u>			
TITLE		☐ DELETE	3 1 TML	E					Change	Addition	
NAME			3 2 NAM	E							
STREET ADDRESS			3.3 STR	EET AD	DRESS						
CITY-ST-ZIP			3.4. CIT		ZIP		_		Charre	☐ Addition	
TITLE		☐ DELETE	4.1 TITL	Ε					Change	☐ Addition	
NAME			. 4. 2 NA								
STREET ADDRESS			4.3 STR								
CITY-ST-ZIP			4.4 CITY		IP		-		Change	Addition	
TITLE			5.1 TITL						□ change	☐ Addidon	
NAME			5.2 NAM		noese					ļ	
STREET ADDRESS					DORESS						
CITY-ST-ZIP		☐ DELETE	5.4 CITY 6.1 TITL		ar	• •			. Change	Addition	
TITLE			6.2 NAM					,]	
NAME	1		0.2 14700	_						I	

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 application and indicated on this annual report or supplemental annual report is true and accurate application and indicated on this annual report or supplemental annual report is true and accurate application and indicated on this annual report or supplemental annual report is true and accurate application and indicated on this annual report or supplemental annual report is true and accurate application and indicated on this annual report or supplemental annual report or supp

NTED NAME OF SIGNING OFFICER OR DIRECTOR

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

(407)228-4645