2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

5161 N.E. 17TH TERRACE

FT. LAUDERDALE FL 33334

DOCUMENT # P98000079856

1. Entity Name

ROLF CONSULTANTS, INC.

Principal Place of Business

5161 N.E. 17TH TERRACE FT. LAUDERDALE FL 33334



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90160 034 ***150.00

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2. Principal F	Place of Busin	ness	3. Mai	3. Mailing Address					01	11 6 111 0 6 111 (00)	
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State				City & State			4.	65-0867488 Applied For Not Applicable			
Zip Country Zip					ry	5. Certificate of Status Desired \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
ROUSELL, RALPH H						Name Street Address (P.O. Box Number is Not Acceptable)					
5161 N.E. 17TH TERRACE						Citati i dalloso (i 10. soxi i tambor lo i tati i ocopitano)					
FT. LAUDERDALE FL 33334											
						City FL Zip Code					
8. The above named entity submits this statement for the purpose of changing its registered						d office or reg	gistered ag	gent, or both, in the State of Florida.	am familiar wit	h, and accept	
	tions of regis			-							
SIGNATURE	Signature, typed	or printed name of registered	agent and title if app	olicable. (NOTI	E: Registered	Agent signature re	equired when re	einstating)	ATE		
		Ú FEE 10 6450 00									
FILE NOW!!! FEE IS \$150.00								9. Election Campaign Financing	g _ \$5	. 00 May Be	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Trust Fund Contribution.	L. Add	led to Fees	
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10.	DD	OFFICERS.	AND DIRECTO		11.	<u> </u>	AL	DDITIONS/CHANGES TO OFFICERS			
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NAME:	ROUSELL,				NAME	ET ADDRESS				į	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Sector 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the accive of 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 06 2003

154.776.3350

Daytime Pho