

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90184 003 ***150.00

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DOCUMENT # P99000036387

1. Entity Name

ROCKS OF PALM BEACH, INC.



Principal Place of Business
**118 NORTH RIVER DRIVE WEST
JUPITER FL 33458**

Mailing Address
**118 NORTH RIVER DRIVE WEST
JUPITER FL 33458**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0913211**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHERMAN, LAURETTA
118 NORTH RIVER DRIVE WEST
JUPITER FL 33458**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D SHERMAN, LAURETT 118 NORTH RIVER DRIVE WEST JUPITER FL 33458			
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

L Sherman

10/3/03

Date

Daytime Phone #

CR2E034 (10/02)

attachment

90135748

9000036387

ROCKS OF PALM BEACH

Lauretta Sherman

International Distributor

5/13/03

Dear Sirs ,

I apologize for the lateness of my payment, but unfortunately my brother died unexpectedly on the 17th April in Germany and I had to rush over to help my sister in law to bury him and sort things out with her, and in all the madness I forgot to post this out before I left.

Please would allow me this lateness this time as my life was really turned upside down for a while I promise it won't happen again.

Yours Sincerely

Lauretta Sherman.

Lauretta Sherman

(President of Rocks of Palm Beach)

PS. If this is not acceptable please let me know, I am going back to Europe to sort out more of his affairs and will be back on the 3rd June.

Thankyou.

LS.

118 North River Drive West, Jupiter, Florida 33458

Phone (561) 745-8032 Fax (561) 745-8037



Email: Rocksofpb@aol.com