

Sent By: Torrillo & Associates, Inc.;

954 726 0913;

May

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90105 003 ***150.00

20065398

05042005 Chg-P CR2E034 (10/03)

DOCUMENT # P99000037869			
1. Entity Name ROSSO CORSA, INC.			
Principal Place of Business 250 TONEY PENNA DRIVE BAY FIVE JUPITER, FL 33458		Mailing Address 250 TONEY PENNA DRIVE BAY FIVE 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 65-0916773		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SELZ, STEVEN M ESO 214 BRAZILIAN AVE #210 PALM BEACH, FL 33480		7. Name and Address of New Registered Agent	
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		DATE 7/12/05	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HUGELSHOFER, KURT	NAME	
STREET ADDRESS	250 TONEY PENNA DRIVE, BAY FIVE	STREET ADDRESS	
CITY-ST-ZIP	JUPITER, FL 33458	CITY-ST-ZIP	
TITLE	D ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	HUGELSHOFER, ROBERT	NAME	
STREET ADDRESS	860 GARDENIA LANE	STREET ADDRESS	
CITY-ST-ZIP	PLANTATION, FL 33317	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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, and all other like empowered.			
SIGNATURE:		Date 7-12-05	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	