


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S16155 1. Entity Name JACK ROSE & ASSOCIATES, INC.	
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Principal Place of Business 10790 NW 14TH ST. STE 180 PLANTATION, FL 33322 US	Mailing Address 10790 N.W. 14TH STREET SUITE 180 PLANTATION, FL 33322
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DO NOT WRITE IN THIS SPACE

FILED
06 MAY 30 PM 4: 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3044205	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ROSE, JACK, J 10790 NW 14TH ST. #180 PLANTATION, FL 33322
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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 reinstating) _____ 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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSE, JACK J. 10790 NW 14TH ST STE 180 PLANTATION, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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100076379891
06/20/06--01019--001 **158.75

\$25/30

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: JACK J. ROSE JACK J. ROSE 4-19-06 (94) 472-7166
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #