FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S21746

ROSENBERG FINANCIAL SERVICES, INC.

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90043 018 ***150.00



2332 PONCE DE SUITE 914	E LEON BLVD. NO 10 RHOT	790 WEST MOORHEAD CIR. STE. B						,			
	ORAL GABLES FL 33134 Accurate BOULDER CO. 80303					DO NOT WRITE IN THIS SPACE					
US	We moved us				- 1	3. Date Incorporated or Qualifed 12/31/1990					
2. Principal P	lace of Business	2a. Mailing Address				Number			A	oplied For	
	South Dixe Highway	26			65	5-024133	3		N	ot Applicable	
Suite, Apt. #, etc. 1530 Suite, Apt. #, etc. 27							Status Desired		•	Additional equired	
City & State	e			6. EI	ection Cam	paign Financing		\$5.00	May Be		
City & State City & State 23 Myami Florida 28				Trust Fund Contribution			. •		•	to Fees	
Zip Country Zip				Country 8. This corporation owes the			on owes the cui	rrent year li	ntangible		
24 33 56 25 USA 29 30				Personal Property Tax.					☐ Yes	□No	
	9. Name and Address of Current	Registered Agent			10. N	ame and A	ddress of New	Registered	d Agent		
			8	Name							
ROSENBERG, DANIEL				82 Street Address (P.O. Box Number is Not Acceptable)							
2333 PONCE DE LEON BLVD.				00017							
SUITE 314				3		-	 -				
COR	AL GABLES FL 33134	8	City					85 Zip	Code		
				1 - 1				F			
11. Pursuant	to the provisions of Sections 607.0502	and 50, 508, Figrida Statutes, Spring, Supply Hangs was authors to 50, 50505, Florida	the abov	/e-named o	orporation s	ubmits this	statement for the	e purpose o	of changing its	s registered	
office or r	registered agent, or both, in the State of im familiar with, and accept the obligation	Normal Supplementary Supplemen	orized b	y the corpor	ration's boar	d of director	s. I hereby acce	ept the app	ointment as re	egisterea	
-	in laminal with and accept the contest		1	Bose	l.			- 1	-90	ļ	
SIGNATURE	Signature, typed or printed name of egistered agent	and title if applicable. NOTE: Re-	gistered Ag	ent signature re	guired when revis	stating)	-	DATE			
12.	OFFICERS AND	DIRECTORS	13.				HANGES TO O	FFICERS A			
TITLE	P DELETE 1				Preside	<i>a</i> t ,			Change	☐ Addition	
NAME	ROSENBERG, DANIEL		1.2 NAME	Ì	Danie	Nose	sperg				
STREET ADDRESS				ET ADDRESS	15,10	28H	Stroet			ļ	
CITY-ST-ZIP	BOULDER CO 80303		1.4 CITY-	ST-ZIP	Boul	der, 🗢	SO:	303			
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NAME											
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TITLE	☐ DELETE 31								Change	☐ Addition	
NAME				· \							
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NAME	}		5.2 NAME	j							
STREET ADDRESS				ET ADDRESS							
CITY-ST-ZIP			5.4 CITY-					·			
TITLE		☐ DELETE	6.1 TITLE	ì					Change	☐ Addition	
NAME	1		6.2 NAME	:						Ţ	
	'	1	•	1						1	
STREET ADDRESS			6.3 STRE	ET ADDRESS							

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 tyle 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 engagements of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition with all other like empowered.

SIGNATURE: