

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S96454

FILED
Feb 19, 2009
Secretary of State

Entity Name: ROSE LEA INTERNATIONAL SERVICES, INCORPORATED

Current Principal Place of Business:

C/O RAYMOND LESLIE MORRIS
PO BOX 915953
LONGWOOD, FL 327915953 US

New Principal Place of Business:

C/O RAYMOND LESLIE MORRIS
3020 TIMPANA POINT
LONGWOOD, FL 32779 US

Current Mailing Address:

C/O RAYMOND LESLIE MORRIS
PO BOX 915953
LONGWOOD, FL 32791 US

New Mailing Address:

FEI Number: 59-3107209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORRIS, RAYMOND-LESLIE
3020 TIMPANA POINT
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDT () Delete
Name: MORRIS, RAYMOND-LESLIE
Address: 2500 ENGLISH IVY CT WFD N
City-St-Zip: LONGWOOD, FL

Title: VTS () Delete
Name: MORRIS, ROSEMARIE A., E.
Address: 2500 ENGLISH IVY CT WFD N
City-St-Zip: LONGWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: MORRIS, RAYMOND-LESLIE
Address: 3020 TIMPANA POINT
City-St-Zip: LONGWOOD, FL 32779

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSEMARIE MORRIS

VTS

02/19/2009

Electronic Signature of Signing Officer or Director

_____ Date