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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED APR 27 AM 10:08 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # V00164

1. Corporation Name ROJESHVEST, INC.

Principal Place of Business

1551 SANDSPUR RD MAITLAND FL 32751 US

Mailing Address

P.O. BOX 4961 390 NORTH ORANGE AVENUE, SUITE 1100 ORLANDO FL 32802-4961 US

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FL, INC 390 NORTH ORANGE AVENUE SUITE 1100 ORLANDO FL 32801

81 Name 82 Street Address (P.O. Box Number if Applicable) 83 City 84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. The only accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and board of directors

OFFICERS AND DIRECTORS

DATE

12. OFFICERS AND DIRECTORS

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include GINSBURG, RONALD M., GINSBURG, JEFFREY S., GINSBURG, SHARON.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes handwritten entries and dates.

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Handwritten date 4/22/99 and number 407/741-8500