FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 29 PM 2:15

DOCUMENT # V05180 (7)

1. Corporation Name
ROSE TATTOO, INC.

Principal Place of Business	Mailing Address
% RITA STERLING 4200 HILLCREST DR. HOLLYWOOD FL 33021	C/O BELL & CO. 551 5TH AVE., #900 NEW YORK NY 10176 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/07/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 627 Eaton Street	26 Bell & Co. CPA's,P.C.
22 Suite, Apt #, etc.	27 Suite, Apt #, etc. 535 Fifth Ave 21st Floor
23 City & State: Key West, FL	28 City & State: New York, N Y
24 Zip: 33040 / 25 Country: USA	29 Zip: 10017 / 30 Country: U S A

4. FEI Number: 65-0354721 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STERLING, RITA
4200 HILLCREST DR.
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name: Donna Lieb
82 Street Address (P.O. Box Number is Not Acceptable): 524 Frances Street
83 Key West, Florida 33040
84 City: Key West FL 85 Zip Code: 33040

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes

SIGNATURE: Donna Lieb — 3/25/95
Signature, typed or printed name of Registered Agent and title if applicable — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☒ Change ☐ Addition
NAME	LIEB, DONNA H.	1.2 NAME	
STREET ADDRESS	20 5TH AVE PH E	1.3 STREET ADDRESS	524 Frances Street
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	Key West, Florida 33040
TITLE	S	2.1 TITLE	☒ Change ☐ Addition
NAME	LIEB, ROBERT M.	2.2 NAME	
STREET ADDRESS	20 5TH AVE PH E	2.3 STREET ADDRESS	524 Frances Street
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP	Key West, Florida 33040
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Donna Lieb — 3/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0475601 FP