


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 25, 2005 08:00 AM
Secretary of State

DOCUMENT # V41600 1. Entity Name ROGER INVESTMENT SERVICES, INC.	
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Principal Place of Business % MILTENBERG 3802 N.E. 207 STREET, SUITE 1002 AVENTURA, FL 33180	Mailing Address % MILTENBERG 3802 N.E. 207 STREET, SUITE 1002 AVENTURA, FL 33180
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DO NOT WRITE IN THIS SPACE



07272005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0338514	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
FELUREN, MARK S 2200 N COMMERCE PARKWAY SUITE 202 WESTON, FL 33326	

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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.

000000377058
08/25/05-80002-021 150.00

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST MILTENBERG, ALISSA 119 PINE OAK DRIVE COLUMBIA, SC 29223
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MILTENBERG, BRUCE 3802 N.E. 207 STREET, SUITE 1002 AVENTURA, FL 33183
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MILTENBERG, ANDREW 363 SEVENTH AVE - 5 FL NEW YORK, NY 10001
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. 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 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: Bruce Miltenberg 8/19/2005 (212) 971-0300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #