## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## 528491 **DOCUMENT #**

1. Entity Name RODRIGUEZ GROVE SERVIC	ES, INC.	
Principal Place of Business 300 N. KROME AVE. BUILDING #9 FLORIDA CITY FL 33034	Mailing Address P.O. BOX 432495 SOUTH MIAMI FL 33243 US	-
2. Principal Place of Business	3. Máiling Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

## **FILED** Feb 10, 2003 8:00 am Secretary of State 02-10-2003 90116 013 \*\*\*150.00

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Suite. Apt. 4, etc.  Suite. Apt. 4, etc.  City 6, State  City 7, Name and Address of States Desired Agent  To Name  ROPRIGUEZ, DIEGO  6890 SUNSET DR  SIMANI FL 33143  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  Street Address (FD, Box Number is Not Acceptable)  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Address (FD, Box Number is Not Acceptable)  City FL 20 Code  Street Addre	300 N. KROME Building #9 Florida City	E AVE.		P.O. E SOUT US	BOX 432495 H MIAMI FL 33243				1 (CASA): 13110 1300 1013 1010 1010 1010			
City & State  Country  Country  Country  S. Country  Same and Address of New Registered Agent  Name  RODRIGUEZ, DIEGO  Streat Address (P.O. Box Number is Not Acceptable)  Streat Address (P.O. Box Number is Not							$\dashv$					
Specification of Status Desired   Sp. Sp. Additional   Sp.	Suite, Apt.	#, etc.		Suite	e, Apt. #, etc.			-	CHECK HERE IF	MAKING (	CHANGES	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, DIEGO Sireet Address (P.O. Box Number is Not Acceptable)  Sireet A	City & State		City	& State	4. FEI Number 59-1724834							
RODRIGUEZ, DIEGO  Since Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City FL Zio Code  S. The above names entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent for large interest agent and time is applicable.  PILE NOW!!! FE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  POP OFFICERS AND DIRECTORS  SIGNATURE  POPRIGUEZ, DIEGO  SIGNATURE  POPRIGUEZ, DIEGO DEGE  SIGNATURE  SIGNATURE  SIGNATURE  POPRIGUEZ, DIEGO DEGE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  POPRIGUEZ, DIEGO DEGE  SIGNATURE  SIG	Zip		Country	Zip		Cour	itry	5. (	Certificate of Status Desired			
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12. Thereby 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 is discounted and the same legal effect as if made under path; that I am an officer or director.		1		data ata (= 200).	alana ant access to the			Continu	110 07(3)(i) Elocido Statutos 15	uthor cost	fy that the i	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. PHEGO ROUNIGUE?

SIGNATURE:

CONTICER OR DIRECTOR