## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 528491**

FILED Feb 10, 2009 Secretary of State

Entity Name: RODRIGUEZ GROVE SERVICES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
UILDING				
	CITY, FL 33034			
Current Mailing Address:		New Mailing Address:		
P.O. BOX SOUTH M	432495  AMI, FL 33243	US		
El Number	59-1724834	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	Address of Cu	rrent Registered Agent:	Name and Address o	of New Registered Agent:
ODRIGU	EZ, DIEGO	BLDG #9		
LORIDA	CITY, FL 33034			
he above	OITY, FL 33034	US	ourpose of changing its registered	d office or registered agent, or both,
he above the State	CITY, FL 33034 named entity su of Florida.	US	ourpose of changing its registered	d office or registered agent, or both,
he above the State	CITY, FL 33034 named entity sue of Florida.  RE:	US		d office or registered agent, or both,  Date
he above the State	named entity sue of Florida.  RE:  Electronic	US ubmits this statement for the p		
he above the State GNATUI	named entity sue of Florida.  RE:  Electronic	US  Signature of Registered Agr  Trust Fund Contribution ( ).	ent	
he above the State GNATUI	named entity sue of Florida.  RE: Electronic npaign Financing  S AND DIRECT  P () C  RODRIGUEZ, DIR	US  Sibmits this statement for the process Signature of Registered Agr  Trust Fund Contribution ( ).  ORS: Delete EGO, ME AVE., BLDG #9	ent	Date
he above the State liGNATUI lection Car pFFICER: title: ame: ddress:	named entity sue of Florida.  RE: Electronic  npaign Financing  S AND DIRECT  P () E  RODRIGUEZ, DIE  300 NORTH KRO FLORIDA CITY, F	US  Signature of Registered Age  Frust Fund Contribution ( ).  ORS:  Delete EGO, ME AVE., BLDG #9 FL 33034  Delete NIEL, BLVD	ent  ADDITIONS/CHANGE  Title:  Name:  Address:	Date ES TO OFFICERS AND DIRECTORS

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: DIEGO RODRIGUEZ P 02/10/2009