

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Candace B. McPherson
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 24 AM 8:20

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 401088 (0)

1. Corporation Name

EDWARD RODRIGUEZ AND COMPANY, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **05/12/1972** 3a. Date of Last Report **08/15/1994**

4. FEI Number **59-6058943** 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. 190.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RODRIGUEZ, EDWARD J.
5108 WEST HANNA AVENUE
TAMPA FL 33634**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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. I hereby 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 title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	RODRIGUEZ, EDWARD J.
STREET ADDRESS	17119 RAINBOW TERRACE
CITY-ST-ZIP	ODESSA FL
TITLE	VSD
NAME	RODRIGUEZ, MICHAEL E.
STREET ADDRESS	510 BELLE CHASE CIRCLE
CITY-ST-ZIP	TAMPA FL
TITLE	VTD
NAME	RODRIGUEZ, JOSEPH E.
STREET ADDRESS	3048 STILLWATER DRIVE
CITY-ST-ZIP	KISSIMEE FL
TITLE	VD
NAME	RODRIGUEZ, EDWARD M.
STREET ADDRESS	5108 WEST HANNA AVE
CITY-ST-ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Rodriguez, Edward J.
1.3 STREET ADDRESS	17119 Rainbow Terrace
1.4 CITY-ST-ZIP	Odessa, FL 33556
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Rodriguez, Michael E.
2.3 STREET ADDRESS	10380 Carrollwood Lane - Apt 266
2.4 CITY-ST-ZIP	Tampa, FL 33618
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Rodriguez, Joseph E.
3.3 STREET ADDRESS	13009 Lorna Place
3.4 CITY-ST-ZIP	Tampa, FL 33618
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Rodriguez, Edward M.
4.3 STREET ADDRESS	5108 West Hanna Ave.
4.4 CITY-ST-ZIP	Tampa FL 33634
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 110.07(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:

Edward J. Rodriguez, President
EDWARD J. RODRIGUEZ
Signature and Title of Registered Agent or Director

Date

(Type or Print Name)

4/14/95 (813) 286-9782