

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 401088 (0)
1. Corporation Name
EDWARD RODRIGUEZ AND COMPANY, INC.



Principal Place of Business Mailing Address
5108 WEST HANNA AVENUE 5108 WEST HANNA AVENUE
TAMPA FL 33634 TAMPA FL 33634

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/12/1972	
21		26		4. FEI Number 59-6059943	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip	25	Country		
29	Zip	30	Country		

9. Name and Address of Current Registered Agent

RODRIGUEZ, EDWARD J
5108 WEST HANNA AVENUE
TAMPA FL 33634

10. Name and Address of New Registered Agent

B1	Name	Michael E. Rodriguez	
B2	Street Address (P.O. Box Number is Not Acceptable)	5108 West Hanna Avenue	
B3			
B4	City	Tampa	FL
B5	Zip Code	33634	

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 *Michael E. Rodriguez* DATE April 24, 1998
(NOTE: Registered Agent signature required when re-stating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	C
NAME	RODRIGUEZ, EDWARD J.	1.2 NAME	Edward J. Rodriguez
STREET ADDRESS	17119 RAINBOW TERRACE	1.3 STREET ADDRESS	17119 Rainbow Terrace
CITY-ST-ZIP	ODESSA FL	1.4 CITY-ST-ZIP	Odessa, FL 33556
TITLE	VSD	2.1 TITLE	P/D
NAME	RODRIGUEZ, MICHAEL E.	2.2 NAME	Michael E. Rodriguez
STREET ADDRESS	1558 PATRICIA AVENUE	2.3 STREET ADDRESS	5108 West Hanna Avenue
CITY-ST-ZIP	DUNEDIN FL	2.4 CITY-ST-ZIP	Tampa, FL 33634
TITLE	VTD	3.1 TITLE	V/S/D/T
NAME	RODRIGUEZ, JOSEPH E.	3.2 NAME	Joseph E. Rodriguez
STREET ADDRESS	17122 LONG ACRES LANE	3.3 STREET ADDRESS	5108 West Hanna Ave
CITY-ST-ZIP	ODESSA FL	3.4 CITY-ST-ZIP	Tampa, FL 33634
TITLE	VD	4.1 TITLE	V/D
NAME	RODRIGUEZ, EDWARD M.	4.2 NAME	Edward M. Rodriguez
STREET ADDRESS	5108 WEST HANNA AVE	4.3 STREET ADDRESS	5108 West Hanna Ave
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	Tampa, FL 33634
TITLE		5.1 TITLE	V
NAME		5.2 NAME	Manny Beltran
STREET ADDRESS		5.3 STREET ADDRESS	5108 West Hanna Ave
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Tampa, FL 33634
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 *Michael E. Rodriguez* DATE April 24 1998 (813) 888-9782

CR2E034 (10/97)