

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 486831

(1)

1. Corporation Name

RODY TRUCK CENTER CORP.



Principal Place of Business

2479 NW 36 ST
MIAMI FL 33142

Mailing Address

2479 NW 36 ST
MIAMI FL 33142

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/01/1975

3a. Date of Last Report

02/14/1995

4. FEI Number

59-1624595

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. 199.032,
Florida Statutes ☐ Yes ☐ No

GOMEZ, RODOVALDO
1260 STARLING AVE.
MIAMI SPRINGS FL 33136

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 of Registered Agent must be typed and dated)

(Typed Name of Registered Agent must be typed and dated)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	GOMEZ, RODOVALDO	
STREET ADDRESS	2479 NW 36TH STREET	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VSD	☐ DELETE
NAME	GOMEZ, YRMA C.	
STREET ADDRESS	2479 NW 36TH STREET	
CITY-STATE-ZIP	MIAMI FL	
TITLE	V	☒ DELETE
NAME	CARRASCO, RENE I.	
STREET ADDRESS	6360 PENT PLACE	
CITY-STATE-ZIP	MIAMI LAKES FL	
TITLE	V	☐ DELETE
NAME	GOMEZ, RODY	
STREET ADDRESS	2479 NW 36TH STREET	
CITY-STATE-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	CARRASCO, MARINA	
STREET ADDRESS	1260 STARLING AVE.	
CITY-STATE-ZIP	MIAMI SPRINGS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	EXEC. VICE PRESIDENT
3.3 STREET ADDRESS	CARRASCO, RENE I.
3.4 CITY-STATE-ZIP	1040 STARLING AVE. MIAMI SPRINGS, FL. 33166
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 change or addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EXEC. V.P.

2-9-96 305-634-3583
DATE (Last Page)

CR2E034 (12/95)