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PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 508260
1. Corporation Name
RODVEN RECORDS, INC.

(7)

FILED

May 19 1997 8:00am

Secretary of State

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Principal Place			Mailing Address	A11000 11A				01911 01911 010		
5191 CORAL WAY, SUITE 110 MIAMI FL 33145			3191 CORAL WAY. SUITE 110 MIAMI FL 33145-3219							
							3. Date Incorporated or Qualified 08/03/1976		of Last R 3/1996	leport
2. Principal Pla	ace of Business		2a. Mailing Addres	38			4. FEI Number		Ar	oplied For
1			26			59-1685920	Not Applicable			
Suite, Apt. #	#, etc.	-	Suite, Apt. #, e	ılc.			5. Certificate of Status Desired			Additional aquired
Clty & State	<u></u>	-	City & State				6. Election Campaign Financing	·	\$5.00	· ·
3		1	28				Trust Fund Contribution			мау ве to Fees
Zip	Country	<u> </u>	Zip		Country	····	8. This corporation has liability for i	ntangible ta		
4	25		29	30	-1			Yes 🗌		
	9. Name and Address		egistered Agent		-		10. Name and Address of New Re-	gistered Aç	jent	
	RIGUEZ DE PALLI, MA				81	Name				
	OORAL WAY, SUITE	טוו			82	Street Ad	dress (P.O. Box Number is Not Acceptab	ile)		
MINAW	VII FL 33145				83					
•										
					B4	City		FL	85 Zip	Code
11. Pursuant to	o the provisions of Section	ns 607 0502 ar	nd 607 1508. Florida	Statutes th	;]] ne above	-named co	progration submits this statement for the n		hanging it	ts registers
office or re	egistered agent, or both,	in the State of F	Florida, Such change	e was autho	rized by	the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	ot the appoi	ntment as	registered
		אויטט טרוו אל	115 01, 3600001 007.0	Jou, Horida	Statutes					
	The state of the s	-								
SIGNATURE _	Signature, typed or printed name of			(NOTE: Regi	siered Ager		quired when reinstating)	DATE		
SIGNATURE .	Si gnal ure, lyped or printed name o		nd title if applicable.		stered Ager		quired when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND I		RS IN 12
SIGNATURE 5	Signalure, typed or printed name o	registered agent an FICERS AND D	nd title if applicable.					ERS AND I	OIRECTOR	
SIGNATURE E	Signature, typed or printed name of OFF PD RODRIGUEZ, RODOL	ringistered agent an ICERS AND D	nd title if applicable.	ETE	13.			ERS AND I		
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