

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

FILED
Apr 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 # 584057 (4)

1. Corporation Name
RODAMA INVESTMENT, INC.



Principal Place of Business Mailing Address
201 SEVILLA AVENUE SUITE 302 201 SEVILLA AVENUE SUITE 302
% CARIBE NATIONAL REALTY % CARIBE NATIONAL REALTY
CORAL GABLES FL 33134 CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified 08/01/1978	
4. FEI Number 59-1854919	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent VALDES, FRANCISCO J % CARIBE REALTY 201 SEVILLA AVE., STE. 302 CORAL GABLES FL 33134		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRESIDENT
NAME	AMADOR, LUIS ESTEBAN	1.2 NAME	LUIS E. AMADOR R.
STREET ADDRESS	1414 CORAL WAY	1.3 STREET ADDRESS	1414 CORAL WAY
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI FL
TITLE	V	2.1 TITLE	VICE PRESIDENT
NAME	RENDON, XAVIER AMADOR	2.2 NAME	ANA MARIA S. DE AMADOR
STREET ADDRESS	1414 CORAL WAY	2.3 STREET ADDRESS	1414 CORAL WAY
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI FL
TITLE	V	3.1 TITLE	
NAME	RENDON, ESTEBAN AMADOR	3.2 NAME	
STREET ADDRESS	1414 CORAL WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	VT	4.1 TITLE	
NAME	AMADOR, CILICIA PINO DE	4.2 NAME	
STREET ADDRESS	1414 CORAL WAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	SECRETARY
NAME	AMADOR, GHISLAINE RENDON	5.2 NAME	ANA MARIA J. DE AMADOR
STREET ADDRESS	1414 CORAL WAY	5.3 STREET ADDRESS	1414 CORAL WAY
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	MIAMI FL
TITLE	S	6.1 TITLE	
NAME	ARRARTE, ROCIO AMADOR DE	6.2 NAME	
STREET ADDRESS	1414 CORAL WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	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

[Signature]

02/25/98

(300) 418 0011

CR2E034 (10/97)