


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # 610041 1. Entity Name RODY TRUCKS INTERNATIONAL, INC.	
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Principal Place of Business 2479 N.W. 36 ST. MIAMI, FL 33142	Mailing Address 2479 N.W. 36 ST. MIAMI, FL 33142
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DO NOT WRITE IN THIS SPACE



03232004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1891464	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GOMEZ, RODOVALDO 18671 COLLINS AVE 3304 SUNNY ISLES BEACH, FL 33160
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000098732 03/29/04 00052 015 150.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GOMEZ, YRMA 18671 COLLINS AVE STE 3304 SUNNY ISLES BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOMEZ, RODOVALDO 186 COLLINS AVE # 3304 SUNNY ISLES BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARRASCO, RENE I 15040 SW 51ST ST MIRAMAR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address and/or other like empowered.

SIGNATURE: 	RENE I. CARRASCO EXECUTIVE VICE PRESIDENT	3-24-04 305-638-3573
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>