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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # F51720



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 05, 1999 8:00 am Secretary of State **Katherine Harris** 03-05-1999 90075 031 ***150.00

RODCO,	, INC-						
Principal Plac	e of Business	Mailing Address					.a 21211 1221
2976 ST RD 776 P.O BOX 3349							
VENICE FL 34293 VENICE FL 34293-0131 US US					DO NOT WRITE IN TH	IIS SPACE	
US		00			3. Date Incorporated or Qualifed	•	
					10/29/1981		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Ар	plied For
21 26		26			59-2125921		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	Additional quired
==L			27			·	
City & State		 	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip Country		28 	Zip Country		This corporation owes the current year		71 663
Zip 24	25		30	,	Personal Property Tax.	Yes	No
24	9. Name and Address of Cur				10. Name and Address of New Registere	d Agent	
			81	Name			
RODRIGUE, JEAN R			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	6 ST RD 776		"	CHECKAG	aress (i .o. box Hambor to Hot Hoopins)		
VEN	ICE FL 34293		83	3			
			84	1 City		. 85 Zip (Code
				,		L	
office or r	registered agent, or both, in the Sta am familiar with, and accept the ob-	ate of Florida. Such change was au ligations of, Section 607.0505, Flori	tnorized by da Statute	y the corpora s.	rporation submits this statement for the purpose tion's board of directors. I hereby accept the application of the purpose tion's board of directors. I hereby accept the application of the purpose tion's board of the purpose t	oointment as re	jistered
42	Signature, typed or printed name of registered	AND DIRECTORS	13.	ent signature requ	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PVPD	DELETE 1.1		-T		Change	Addition
NAME	RODRIGUE, JEAN R.	_	1.2 NAME				
STREET ADDRESS	0070 OD 770		1.3 STREE	ET ADDRESS			\
CITY-ST-ZIP	VENICE, FL 00000		1.4 CITY-	ST-ZIP			
TITLE	ST	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	RODRIGUE, JEAN L.		2.2 NAME	}			
STREET ADDRESS	OD 770	1		ET ADDRESS	*		
CITY-ST-ZIP	VENICE, FL 00000		2.4 CITY-	ST-ZIP		<u> </u>	
TITLE		☐ DELETE 3.1				Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ET ADDRESS			
CITY-ST-ZIP			000.7.2.	I			
ЗЛПТ	ł.		3.4. CITY-	ST-ZIP		Channa	- Addition
NAME		☐ DELETE	3.4. CITY- 4.1 TITLE			Change	Addition
STREET ADDRESS		☐ DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME			☐ Change	☐ Addition
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREE	ET ADDRESS		Change	Addition
TITLE			3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY-	ET ADDRESS			
TITLE		☐ DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE	ET ADDRESS ST-ZIP		☐ Change	Addition
NAME			3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP			
NAME STREET ADDRESS			3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP TITLE			3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY- 6.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREI 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREI 5.4 CITY- 6.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP		☐ Change	Addition

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, with all other like empowered.

SIGNATURE:

941-468-6105