2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 19, 2004 08:00 AM Secretary of State DOCUMENT # F51720 1. Entity Name RODCO, INC. Mailing Address Principal Place of Business 2976 ST RD 776 2976 ST RD 776 VENICE FL 34293 US VENICE FL 34293 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State Applied For 4. FEI Number City & State 59-2125921 Not Applicable Ζıρ Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RODRIGUE, JEAN R 2976 ST RD 776 Street Address (P.O. Box Number is Not Acceptable) VENICE FL 34293 City Zip Code 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 Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Anded to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition PVPD TITLE Change TITLE ☐ Delete RODRIGUE, JEAN R. NAME NAME U00000056455 STREET ADDRESS STREET ADDRESS 2976 SR 776 02/19/04-80019-024 150.00 CITY-ST-ZIP CITY-ST-ZIP VENICE, FL 00000 Delete TITLE Change Addition TITLE NAME RODRIGUE, JEAN L. NAME STREET ADDRESS STREET ADDRESS 2976 SR 776 VENICE, FL 00000 CITY-S1-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE MAME MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Thange Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP

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SIGNATURE: Jean Stophing John R. Rockigus 3/15/04 941-46
SIGNATURE: SIGNATURE AND TYPED OR PRINTED PLANE OF SIGNING OFFICER OR DIRECTOR

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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)(i), 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, with all other like empowered.