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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F97140

(0)

## FILED Feb 24 1998 8:00am Secretary of State

RODO	MAR INC.				
Principal Plac	e of Business	Mailing Address		- 1 1881/108 (110 10)() 1000/ (10)() 8/0/( 00)( 0/0/	e nimis debei minis nëdis bilkt (dhe
% ROQUE MARTIN 8970 SW 92ND ST MIAMI FL 33155		% ROOUE MARTIN 8370 SW 32ND ST MIAMI FL 33155		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
ł				08/27/1982	]
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2214906	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		[27]	·- ·- · · · · · · · · · · · · · · · · ·		Fee Required
23		City & State  [28]		<b>6.</b> Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid th	_ · _ ·
24	25 Name and Address of Curren		30	Personal Property Tax due June 30.	Yes No
<del></del>	9. Name and Address of Currer	u veðisteten Wåeur	81 Name	10. Name and Address of New Registe	erea Agent
MARTIN, ROUTE					
8370 SW 32ND ST			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
MIA	AMI FL 33155		83		
			83		
			84 City		FL 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, tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATORE.	Signature, typed or per test cares of registered age	nt and trie if applicable (NOTL	Fingistered Agent signature require	ed when reinstating) Do	ATE
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TIFLE		☐ Change ☐ Addition
NAME	MARTIN, ROQUE		1.2 NAME	•	
STREET ADDRESS	8370 SW 32ND ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP		
TITLE	SD	☐ DELETE	2 1 TITLE		Change Addition
NAME	MARTIN, DORA M.		2.2 NAME	<u>,</u>	1
STREET ADDRESS	8370 SW 32ND ST		2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	DELETE	2. 4 CITY- ST-ZIP		
TITLE	TD	DELFTE	3 1 TITLE		Change Addition
NAME STREET ADDRESS	Martin, Maria T 8370 SW 32ND ST		3 2 NAME		
CITY-ST-ZIP	MIAMI FL		3 3 STREET ADDRESS		
TITLE	MINUM I L	☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME			4. 2 NAME		Change D Addition
STREET ADORESS					
CITY-ST-ZIP			4 3 STREET ADDRESS		
TITLE		☐ DELETE	4.4 CHY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		C CONTROL C CONTROL
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY-ST-ZIP			5.4 CITY-ST-ZIP		
TOTLE	<del></del>	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City-St-ZiP		
	when a contemporary that the particular	ith this blood door not qualify for		Section 110 07/21/i) Florida Statutos I furth	

14. Thereby 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 three attachment with an address.

SIGNATURE:

done mit

FE3 17/98

CR2E034 (10/97)