


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # K10921
 1. Entity Name
 ALFONSO RODRIGUEZ P.A.



Principal Place of Business Mailing Address
 6780 CORAL WAY, SUITE 100 6780 CORAL WAY, SUITE 100
 MIAMI, FL 33155 MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-0022257 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 RODRIGUEZ, ALFONSO
 9103 SW 70TH TERR
 MIAMI, FL 33173

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RODRIGUEZ, ALFONSO
STREET ADDRESS	9103 SW 70TH TERR
CITY - ST - ZIP	MIAMI, FL
TITLE	STD
NAME	RODRIGUEZ, MARIA E.
STREET ADDRESS	9103 SW 70TH TERR
CITY - ST - ZIP	MIAMI, 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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400000149230
 05/03/04-80205-014 150.00

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, with all other like empowered.

SIGNATURE: Alfonso Rodriguez, PRES. Date: 4/29/04 Daytime Phone #: (305) 642-1824