

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K33829** (8)

1. Corporation Name
RODO INTERNATIONAL CORP.



Principal Place of Business
**2112 W. 62ND ST. BAY 5
HIALEAH FL 33016**

Mailing Address
**2112 W. 62ND ST. BAY 5
HIALEAH FL 33016**

2. Principal Place of Business
21 18440 NW 78 Ave
22 Suite, Apt #, etc.
23 City & State **Miami F**
24 Zip **33015** 25 Country **USA**
26 18440 NW 78 Ave
27 State, Apt #, etc.
28 City & State **Miami FL**
29 Zip **33015** 30 Country **USA**

3. Date Incorporated or Qualified **09/23/1988** 3a. Date of Last Report **03/14/1995**
4. EIN Number **65-0077102** Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes Yes No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
**MICELI, ARTURO A.
2112 W. 62ND ST. BAY 5
HIALEAH FL 33016**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) **18440 NW 78 Ave**
83
84 City **Miami** 85 Zip Code **FL 33015**

11. Pursuant to the provisions of Sections 607.0602 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE _____ DATE _____ DAY _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MICELI, ARTURO A.	
STREET ADDRESS	18440 NW 78 AVENUE	
CITY- ST- ZIP	MIAMI FL 33015	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MICELI, MARCELO A	
STREET ADDRESS	18440 NW 78 AVENUE	
CITY- ST- ZIP	MIAMI FL 33015	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 TITLE	
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9 TITLE	
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13 TITLE	
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(A), Florida Statutes. I further certify that the information included 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 of this report, or on an attachment with an address.

SIGNATURE: **Arturo A. Miceli** 01/16/96 (305) 362-4113
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
President

CR2E034 (12/95)