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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L45973

(9)

ROD'S IMPORT SALES & SERVICE, INC.

	997 8:00am ary of State
te Incorporated or Qualified /22/1990	3e. Date of Last Report 04/19/1996

Principal Place of Business Mailing Address											
5525 OLD WINT ORLANDO FL 3	ter garden road 12811		5525 OLD WINTER GARDEN ROAD ORLANDO FL 32811-1524								
							3. Date Incorporated or Qualified 01/22/1990 3a. Date of Last Report 04/19/1996				
2. Principal Pl	lace of Business	2a. Mailing	g Address				4. FEI Number	J		Applied Fo	
21		26					58-1867957			Not Applica	
Suite, Apt #, etc		}η · ·	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	<u> </u>	City &	State				6. Election Campaign Financing			00 May Be	
23		28					Trust Fund Contribution			ed to Fees	
Zip	Country	Zip					8. This corporation has liability for i	angible	tax unde	er s. 199.032	
4	25	29		30				Yes [
	9. Name and Address of Cur	rent Registered A	gent				10. Name and Address of New Re	glatered A	gent		
ROD	RIGUEZ, IGNACIO			8	31	Name					
	OLD WINTER GARDEN ROA	D)- <u>-</u> -	-	Ox	(D.C. D., N., ber in Market	1-3			
	ANDO FL 32811	-			32	Street Addi	ess (P.O. Box Number is Not Acceptab	18)			
				8	33			.,			
				6	84	City		FL	85 Z	ip Code	
agent ai	m familiar with, and accept the ob	ligations of, Section	n 607.0505, F	lorida Statul	tes.	· 	ion's board of directors. I hereby accep		intment	as registere	
	Significant typed or professionant of registered		ole (NC		Agen	il signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	STAC STAC	DIDEOT	000 111 40	
12.	OFFICERS /	AND DIRECTORS	DELETE	13.	-		ADDITIONS/CHANGES TO OFFIC	ENS AND	Chang		
THE	IGNACIÓ RODRIGUEZ		TTI REFERE	1.1 TITL					TI CURIT	ge L_J Ado	
NAME	5525 OLD WINTER GARDEN	i		1.2 NAM							
STREET ADDRESS	ORLANDO FL			1		ADDRESS					
CITY-SI-ZIP	UNLANDO FL		SELETE	1.4 CITY	_	- ZIP			776		
TIFLE			DELETE	2.1 TITL					Chang	ge Add	
NAME				2.2 NAM	Æ						
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CITY-ST-ZIP				2. 4 CIT		I - ZIP					
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NAME				3.2 NAM	ΑE						
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CITY-ST-ZIP				4.4 CITY	Y-ST	· ZIP					
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NAME				5.2 NAM	ИE	1					
STREET ADDRESS	Ti.					ADDRESS					
CITY-ST-ZIP				5.4 CITY							
TITLE			DELETE	6.1 TITL		*"			☐ Chang	ge 🔲 Add	
NAME				6.2 NAM		-					
						ADDDCCC					
STREET ADDRESS				0.3 SIR		ADDRESS					
CAN OF NO. 1				■ £ x f01Ts	v tr	71D					

14. I do hereby certify that the informal ori supplied with this filing does not quality 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 confequence in the receiver of the confequence in the receiver of the confequence in Block 12 or Block 13 if changed, or on an attractment with an address.

SIGNATURE:

SIGNATURE AND THEO OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1/22/97

Daytime Phone #