

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L45973

1. Entity Name  
ROD'S IMPORT SALES & SERVICE, INC.



Principal Place of Business  
5525 OLD WINTER GARDEN ROAD  
ORLANDO, FL 32811

Mailing Address  
5525 OLD WINTER GARDEN ROAD  
ORLANDO, FL 32811

**FILED**  
**Aug 27, 2008 08:00 AM**  
**Secretary of State**



08132008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
58-1867957

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

RODRIGUEZ, IGNACIO  
5525 OLD WINTER GARDEN ROAD  
ORLANDO, FL 32811

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME IGNACIO RODRIGUEZ  
STREET ADDRESS 5525 OLD WINTER GARDEN  
CITY-ST-ZIP ORLANDO, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000958491  
08/27/08-80005-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/31/08 407 298-61  
94  
Date Daytime Phone #