

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

FILED

Mar 26 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M13249** (1)

1. Corporation Name
RUDS, INC.

Principal Place of Business

14380 SW 139TH COURT
3830 S.W. 130TH AVE.
MIAMI F 33186
US

Mailing Address

% RAUL D. SEGREDO
3830 S.W. 130TH AVE.
MIAMI FL 33175-3314



2. Principal Place of Business 21 14380 SW 139 COURT Suite, Apt. #, etc. 22 City & State 23 MIAMI, FL Zip 33186		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 33175		3. Date Incorporated or Qualified 03/27/1985	3a. Date of Last Report 05/01/1996
4. FEI Number 59-2530717		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent STYLIAN N COCALIDES 7501 SW 133 ST MIAMI FL 33156				10. Name and Address of New Registered Agent 81 Name Luis C. Segredo 82 Street Address (P.O. Box Number is Not Acceptable) 3830 SW 130 Ave 83 84 City MIAMI FL 85 Zip Code 33175	
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11. Pursuant to the provisions of Sections 607.0592 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. I am familiar with, and accept the obligations of, Section 607.0504, Florida Statutes.

SIGNATURE: **Luis Segredo** (NOTE: Registered Agent signature required when reinstating) DATE: **3/20/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	Vice President SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COCALIDES, STYLIAN N	1.2 NAME	
STREET ADDRESS	14863 S.W. 141ST CT.	1.3 STREET ADDRESS	7501 SW 133 ST
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	MIAMI, FL
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEGREDO, RAUL D	2.2 NAME	
STREET ADDRESS	9555 S.W. 148TH AVENUE CIRCLE, N	2.3 STREET ADDRESS	14663 SW 141 CT
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	MIAMI, FL 33186
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEGREDO, LUIS C.	3.2 NAME	
STREET ADDRESS	3830 SW 130TH AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby 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 on an attachment with an address.

SIGNATURE: **[Signature]** DATE: **3/20/97** 305-256-0429

CR2E034 (9/96)