2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Jul 17, 2000 8:00 am Secretary of State **DOCUMENT # M44829** 1. Entity Name **BOBBY RODRIGUEZ PRODUCTIONS. INC.** 07-17-2000 90006 016 ***150.00 Principal Place of Business Mailing Address 801 NW 57 STREET 6191 NW 32 TERR. FT. LAUDERDALE FL 33304-2826 FT. LAUDERDALE FL 33309 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0001882 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, ROBERT MATTHEW Street Address (P.O. Box Number is Not Acceptable) 6191 N.W. 32 TERR. FT. LAUDERDALE FL 33309 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing **\$5.00** May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME RODRIGUEZ, ROBERT M NAME STREET ADDRESS STREET ADDRESS 6191 N.W. 32 TERR CITY-ST-ZIP CITY-ST-ZIP. FT. LAUD FL 33309 ☐ Delete TITI F Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition Delete TITLE ,TITLE, NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.



$B_{obby} \ R_{odriguez} \ P_{roductions, Inc.}$ Special Events & Entertainment

801 N.W. 57 Street; Fort Lauderdale, Florida 33309; (954) 771-7117; fax 771-7045



Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

To Whom it may Concern,

I have been in business for 19 years and have always filed my Corporate papers promptly. I have just received from you a "second notice" and unfortunately never received a first. Under the circumstances, I would appreciate you waiving the late fee. I place myself at your mercy. In the mean time I have enclosed the standard \$150 fee.

Thanking you in advance.

Sincerely,

Robert M. Rodriguez

Pres.

encl.