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 # M53519

(8)

ROCKDALE TRADING CO. INC.

FILED May 12 1997 8:00am Secretary of State



Principal Place of Business 9781 SW 147 ST. MIAMI FL 33178 US		Mailing Address 13951 SW 66 ST. APT. 407-A MIAMI FL 33183-2246 US		3. Date incorporated or Qualified 3a. Date of Last Report			
					06/09/1987	04/30/199	
2. Principal 21	Place of Business	2a, Mailing Address 26			4. FEI Number 59-2817428	h	Applied For Not Applicable
Suite, Ap	it. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 7	5 Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country 30	y	8. This corporation has liability for it	ntangible tax unde Yes No	rs. 199.032,
24	25 g. Name and Address of Current		301		Florida Statutes 10. Name and Address of New Reg		
	ENDRICKS, VERNON L SR: ぐん。		81	Name			
97	781 SW 147 ST. IAMI FL 33176		83 83		iress (P.O. Box Number is Not Acceptabl		ip Code
agent I SIGNATURE	I am familiar with, and accept the obligation	tions of, Section 607.0505, Flor JR PRESIDEN Land title if applicable (NOTE	rida Statute	S. Signature requ	ation's board of directors. I hereby acception is board of directors. I hereby acception in the state of the	8/1/47	
1:118	STD	DELETE	1.1 TATLE		ADDITIONO/OFFATOLO TO OFFTO	Chang	
NAME	HENDRICKS, VERNON L SR		1.2 NAME				
SUBJECT ADDRESS	13951 S.W. 66 ST. APT 407-A		1.3 STREE	T ADDRESS			
CITY-ST ZW	MIAMI FL 33183		1.4 CITY -	ST-ZIP			
TIRE	PD	☐ DELETE	2.1 T(TL€			Chang	ge Addition
NAME	HENDRICKS, VERNON L JR		2.2 NAME				
STREET ADDRES	9781 SW 147 ST. MIAMI FL 33176			1 ADDRESS			
CIY ST ZP	MIAMI FL 33170	DELETE	2. 4 CITY-	ST-ZIP		Chang	ae Addition
TILLE		€ precit	3.1 TITLE 3.2 NAME				in The second
STREET ADDRES	s.			T ADDRESS			
City - St - ZIP			3.4. City-	i			
TILE		☐ DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Chang	ge Addition
NAME			4. 2 NAME	:			
STREET ADDRES	8		4.3 STREE	T ADORESS			
CITY ST ZF			4.4 CITY-	ST-ZIP			
T FLF		☐ DELETE	5.1 TITLE			[□] Chang	ge Addition
NAMi			52 NAME	j			
STREET AODRES	8			T ADDRESS			
CHY-St ZO		Floritte	5.4 CITY-	ST-ZIP		[7] Ch	00 A-ddi:
TITLE		☐ DELETE	61 TITLE			☐ Chang	ge [] Addition
NAME			6.2 NAME				
STHEFT ADORES	S			T ADDRESS			
CITY ST 7IP			6.4 CITY -	ST-ZIP			

14. To othereby 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 of 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.