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PROFIT CORPORATION ANNUAL REPORT

1999

ROCKDALE TRADING CO. INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90048 029 ***150.00

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28	Zip Country Zip Country 28, This Persi 9, Name and Address of Current Registered Agent 10. Nam HENDRICKS JR, VERNON J 9781 SW 147 ST. MIAMI FL 33176 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation subtraction of registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board or agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 3 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 3 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 3 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 3 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating agent. I am familiar with a composition of the co	ction Campaign Financing S5.00 May Be
9. Name and Address of Current Registered Agent HENDRICKS JR, VERNON J 9781 SW 147 ST. MIAMI FL 33176 43. Street Address (P.O. Box Number is Not Acceptable) 84. City FL 85 Zip Code 41. Pursuant to the provisions of Sections 607.0502 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE TITLE STD OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE STD DELETE 1.1 TITLE STD ORAGE HENDRICKS, VERNON L SR 1.2 NAME HENDRICKS, VERNON L JR 1.3 STREET ADDRESS TITLE PD OCHANGE OFFICERS AND LIRE Change Addition Change Change Addition Change Change Addition Change Addition Change Addition Change Change Change Change Change Cha	9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name HENDRICKS JR, VERNON J 9781 SW 147 ST. MIAMI FL 33176 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation subtraction of fice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board or agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaint 12. OFFICERS AND DIRECTORS 13. ADDITED	st Fund Contribution Added to Fees
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CITY-ST-ZIP 14. 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 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, with all other like empowered.

5.4 CITY-ST-ZIP

63 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ Change

Addition