2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33255

FILED Apr 27, 2007 Secretary of State

Entity Name: RODRIGUEZ GROUP HOME, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4505 NW CAROL CI	199TH ST ITY, FL 33055	5			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
4505 NW CAROL CI	199TH ST ITY, FL 33055	;			
FEI Number	: 65-0136184	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
4505 NW CAROL CI	ITY, FL 33055				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registers	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (RODRIGUEZ, 4505 NW 199 CAROL CITY,	TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (MEDINA, DIGN 265 W 63RD S MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (MEDINA, VIRG 265 W 63RD S MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (OLIVA, TANYA 705 W 63RD [HIALEAH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (OSORIO, DOF 6751 SW 13TI MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (ALDERMAN, E 8328 NW 201 HIALEAH, FL	TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYDIA RODRIGUEZ PRES 04/27/2007