

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000083614

1. Entity Name

ROD ENTERPRISES, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90031 014 ***150.00

Principal Place of Business

1900 E. ROBINSON ST.
ORLANDO FL 32803

Mailing Address

1900 E. ROBINSON ST.
ORLANDO FL 32803

2. Principal Place of Business

100 Bedford Rd.

3. Mailing Address

100 Bedford Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Altamonte Springs, FL

City & State

Altamonte Springs, FL

Zip

32714

Country

Seminole

Zip

32714

Country

Seminole

4. FFI Number

59-3677926

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPENCER, STEVEN A
1900 E. ROBINSON ST.
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name

Robert R. Prado

Street Address (P.O. Box Number is Not Accepted)

100 Bedford Rd.

City

Altamonte Springs

FL

Zip Code

32714

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

SIGNATURE

Robert R. Prado Robert R. Prado

Signature (Typed or printed name of registered agent and filer if applicable)

(NOTE: Registered Agent's signature required when registering)

(Date)

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	PRADO, ROBERT R	
STREET ADDRESS	1108 DORIS ST.	
CITY-STATE-ZIP	ALTAMONTE SPRINGS FL 32714	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN...

TITLE	Director	☒ Change ☐ Addition
NAME	Robert R. Prado	
STREET ADDRESS	100 Bedford Rd	
CITY-STATE-ZIP	Altamonte Springs, FL 32714	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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.

SIGNATURE:

Robert R. Prado

Robert R. Prado

4/2/01

407-774-1318

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (10/00)