2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State
05-02-2005 90501 047 ***150.00

DOCUMENT # P00000083614

1. Entity Name
ROD ENTERPRISES, INC.

Principal Place of Business	Mailing Address
100 BEDFORD RD ALTAMONTE SPRINGS, FL 32714	100 BEDFORD RD ALTAMONTE SPRINGS, FL 32714

04222005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
107 Camden Rd.	107 Camden Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Altamonte Springs, FL	City & State: Altamonte Springs, FL
Zip: 32714 Country: US.	Zip: 32714 Country: US

4. FEI 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

PRADO, ROBERT R
100 BEDFORD RD
ALTAMONTE SPRINGS, FL 32714

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
107 Camden 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] Robert Prado 4/23/05.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D NAME: PRADO, ROBERT R STREET ADDRESS: 100 BEDFORD RD CITY-ST-ZIP: ALTAMONTE SPRINGS, FL 32714	☐ Delete	TITLE: NAME: STREET ADDRESS: 107 Camden Rd. CITY-ST-ZIP: Altamonte Springs FL 32714.	☒ Change ☐ Addition
TITLE: V NAME: PRADO, OFELIA STREET ADDRESS: 100 BEDFORD RD CITY-ST-ZIP: ALTAMONTE SPRINGS, FL 32714	☐ Delete	TITLE: NAME: STREET ADDRESS: 107 Camden Rd. CITY-ST-ZIP: Altamonte Springs, FL 32714	☒ Change ☐ Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Robert Prado 4/23/05. 4078803600.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #