

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 11, 2003 8:00 am**  
**Secretary of State**

02-25-2003 90112 039 \*\*\*150.00

**DOCUMENT # P02000068267**

1. Entity Name

A.J. RODRIGUEZ ENTERPRISES, INC.



Principal Place of Business

10814 IRONSTONE DRIVE SOUTH  
JACKSONVILLE FL 32246

Mailing Address

10814 IRONSTONE DRIVE SOUTH  
JACKSONVILLE FL 32246



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

01-0734568

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, DELBIS N  
11126 WINDHAVEN DRIVE SOUTH  
JACKSONVILLE FL 32225

7. Name and Address of New Registered Agent

Name

Rodriguez, Alexander J.

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

10814 Ironstone Dr. South

City

Jacksonville

FL

Zip Code  
32246

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]*

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when re-registering)

2-24-3

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003, Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
P	RODRIGUEZ, NEIDA E	10814 IRONSTONE DRIVE SOUTH	JACKSONVILLE FL 32246	
V	RODRIGUEZ, ALEXANDER J	10814 IRONSTONE DRIVE SOUTH	JACKSONVILLE FL 32246	<input type="checkbox"/> Delete
T	NAIL, DEBORAH J	393 FILMORE DRIVE SOUTH	JACKSONVILLE FL 32225	<input checked="" type="checkbox"/> Delete
S	NAIL, JOHN P	393 FILMORE DRIVE SOUTH	JACKSONVILLE FL 32225	<input checked="" type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P, D				<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-3

Date

904-813-36-01

Daytime Phone #

CR2E034 (10/02)