


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

05-24-2004 90006 026 ***150.00

DOCUMENT # P03000132748		
1. Entity Name ROIDI MILLWORK, INC.		

Principal Place of Business 2911 SW 117 COURT MIAMI, FL 33175	Mailing Address 2911 SW 117 COURT MIAMI, FL 33175
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54055525

2. Principal Place of Business 7031 Sw 129 Ave Suite, Apt. #, etc. 3	3. Mailing Address 7031 Sw 129 Ave Suite, Apt. #, etc. 3
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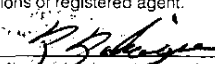
04202004 Chg-P CR2E034 (10/03)

City & State Miami, FL	City & State Miami, FL
Zip 33183	Country
City & State Miami, FL	City & State Miami, FL
Zip 33183	Country

4. FEI Number 20-0665316	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RODRIGUEZ, ROGELIO 2911 SW 117 COURT MIAMI, FL 33175

7. Name and Address of New Registered Agent Name Rogelio Rodriguez Street Address (P.O. Box Number is Not Acceptable) 7031 Sw 129 Ave Apt 3 City Miami FL Zip Code 33183
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8. I, 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 	DATE 5/1/04
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, ROGELIO 2911 SW 117 COURT MIAMI, FL 33175 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rodriguez, Rogelio 7031 Sw 129 Ave Apt 3 Miami, FL 33183 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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)(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: 	DATE 5/1/04	Daytime Phone #
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		