

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000000081	
1. Entity Name RODRIGUEZ AND SONS OF PALM BEACH, INC	

Principal Place of Business 1240 NW 16 STREET BELLE GLADE, FL 33430	Mailing Address 1240 NW 16 STREET BELLE GLADE, FL 33430
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01102006 No Chg-P CR2E034 (11/05)

4. FET Number
37-1481907

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RODRIGUEZ, ROMARICO
1132 NW AVENUE L APT. 6
BELLE GLADE, FL 33430**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable

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

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RODRIGUEZ, ROMARICO
STREET ADDRESS	1132 NE AVENUE L APT. 6
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	D
NAME	RODRIGUEZ, CARLOS ALBERTO
STREET ADDRESS	1132 NE AVENUE L APT. 5
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000342251
01/24/06-BUYERS-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Romario Lopez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/17/06

DATE

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